



**CPRS GUI v.28 (PATCH# OR\*3.0\*280)**  
**RELEASE NOTES**

---

**FEBRUARY 2011**

## Table of Contents

---

<b>Table of Contents .....</b>	<b>2</b>
<b>Installation Requirements .....</b>	<b>4</b>
Required Patches .....	4
Related Patches .....	4
<b>Release Method .....</b>	<b>4</b>
<b>Patient Safety Issues .....</b>	<b>5</b>
<b>Known Issues .....</b>	<b>10</b>
<b>New Functionality .....</b>	<b>11</b>
Consults.....	11
Notes .....	11
Order Checks .....	11
Orders.....	13
<b>Defect Fixes.....</b>	<b>14</b>
About CPRS.....	14
Allergies.....	14
Consults.....	14
Debugging Tools.....	16
Electronic Signature.....	17
Encounter .....	17
Event-Delayed Orders.....	17
General Dialog Displays.....	18
Graphing .....	18
Internal File Access.....	19
Lab .....	19
Location Switch .....	22
Medications.....	22
Non-VA Medications.....	22
Notifications.....	22
Order Checks .....	24
Order Dialogs.....	25
Order Files .....	28
Order Printing .....	28
Order Sets.....	28
Orders.....	29
Parameter Changes/Additions.....	35
Patient Record Flags .....	36
Patient Selection.....	36
Postings.....	37
Primary Care Button .....	38
Printing.....	38
Problem List.....	39
Procedures.....	39
Provider Selection .....	39

Radiology or Imaging .....	40
Reminders .....	40
Remote Data.....	42
Reports .....	42
Set Up.....	43
Spell Check .....	43
Templates .....	44
Time Out .....	44
TIU (Text Integration Utilities) .....	45
Tools Menu .....	47
VBECS (VistA Blood Establishment Computer System) .....	47
508 Changes.....	51

## Installation Requirements

---

### Required Patches

Below is a list of patches that you must verify are properly installed on your system before OR\*3.0\*280 can be installed:

- GMRC\*3.0\*66 (Released in CPRS28\_REQUIRED.KID with CPRS v28)
- LR\*5.2\*395
- OR\*3.0\*181
- OR\*3.0\*293 (Released in CPRS28\_REQUIRED.KID with CPRS v28)
- OR\*3.0\*295
- OR\*3.0\*296
- OR\*3.0\*302
- PSS\*1.0\*142 (Released as a host file PSS\_1\_142.KID with CPRS v28)
- PSS\*1.0\*147
- PSS\*1.0\*151 (Released as a host file PSS\_1\_151.KID with CPRS v28)
- PXRM\*2.0\*17
- SD\*5.3\*536
- XU\*8.0\*474
- USR\*1.0\*33

### Related Patches

The following patches are required for functionality but are not required for installation:

- GMRC\*3.0\*64
- GMTS\*2.7\*90
- OR\*3.0\*337

**Note:** CPRS GUI version 28 requires Internet Explorer 4.0 (IE4) or later. However, Public Key Infrastructure (PKI) functionality requires IE 5.5 or later with 128-bit encryption.

## Release Method

---

CPRS GUI v.28 is patch OR\*3.0\*280. It will be distributed in the bundle OR\_PSI\_PXRM\_V28.ZIP, which contains the following:

- OR\*3.0\*280
- PSJ\*5.0\*226
- PXRM\*2.0\*16

For more information, please see the *CPRS GUI version 28 (Patch# OR\*3\*280) and Associated Patches Installation Guide*.

## Patient Safety Issues

---

- **PSPO 444: When the Order Is Signed the Recently Entered Allergy Is Not Assessed (PSI-06-183, Remedy 169995, CQ 13518)** – Previously, because CPRS does order checking when the user presses Accept, it was possible that an allergy could be entered between the time an order was accepted and the user signed the order.

Resolution: Developers added an order check in CPRS that takes place at signature. This check is to detect only those allergies entered between the time the user accepts the orders and the user signs the orders.

- **PSPO 538: Display of Patient Status (Inpatient vs. Outpatient) in CPRS Meds Tab Is Not Noticeable Enough Upon Ordering (PSI-07-085, Remedy 187803, CQ 16833, 17491)** – Previously, when the user began ordering medications, the form caption at the top of the both the inpatient and outpatient dialogs read: “Medication Order”. The providers felt that the patient’s status was not noticeable enough.

Resolution: To help users identify which kind of order they are placing, developers changed the form captions for the dialogs. The form captions at the top of the dialogs will now read “Outpatient Medications”, “Inpatient Medications”, or “Clinic Orders”. The Infusion Order dialog will also display as “Infusion Orders” or “Clinic Infusion Orders” depending on the type of order being written. Also, to help users know what the patient status is, CPRS added the term “Inpatient” or “Outpatient” after the patient’s name based on the patient’s current status.

- **PSPO 542: Delayed Orders Did Not Lapse in 24hr; MD Rewrote So There Were Two Sets of Orders (PSI-07-089, Remedy 189760, CQ 15180)** – Previously, CPRS was using a calendar day instead of hours to calculate when to lapse some delayed orders.

Resolution: Developers changed how CPRS handles lapsing. Lapsing should now occur within 1 hour of the time of lapsing (due to the running of ORMTIME) instead of only lapsing shortly after midnight.

- **PSPO 735: Addition of Audit Trail Functionality when Forwarding Consults - M Work (PSI-07-120, Remedy 195099, CQ 15561, 16430)** – Previously, when a user decided to forward a consult, CPRS did not display the name that the previous user had placed in the Attention field. It appeared to be blank. However, if the user forwarded the consult, the original name was placed in the Attention field without the user’s knowledge. And there was no audit trail to review to whose attention the consult had been sent.

Resolution: CPRS developers corrected the problem by making the name in the attention line display when a user forwards a consult. If the user changes the person to whom the consult will go, CPRS keeps an audit trail of which names have been in the Attention field. The Consults Detail Display shows the history of which users

took action on the consult, including who forwarded it and to whose attention it was previously sent. This resolution includes the changes in patch GMRC\*3.0\*64.

- **PSPO 834: “Invalid Procedure” Error Message Needs Additional Information (PSI-07-247, Remedy 69886, CQ 15813, 16223)** – Previously, if there was a problem placing a radiology or procedure order, CPRS would display the following error message: “Invalid Procedure, Inactive, no Imaging Type or no Procedure Type”. This message was somewhat unclear.

Resolution: This problem was resolved in two parts:

- **Part 1 of 2:** Developers replaced the error message with the following: “The order has not been saved. You must contact the Imaging Department for help completing this order.”
- **Part 2 of 2:** Also, in response to this problem, developers added a feature in CPRS that generates a mail message that includes the error details and sends it to the responsible mail group. Users can designate which mail group the message is sent to through the OR RADIOLOGY ISSUES parameter.

- **PSPO 837: Consult Alert Updates (COMPLETED Status) Navigate to TIU Doc instead of Comment Text (PSI-08-007, Remedy 70380, 70118, 197479, CQ 16030)** – If the consult request was in COMPLETE status, then the comment alert took the user to the TIU document, not the new comment text, so the user could easily miss the request/actionable item.

Resolution: Developers changed CPRS so that when processing a “comment added” notification instead of opening the note attached to the consult, CPRS opens the consult and scrolls down to the specific comment. CPRS also highlights the comment to help it stand out.

- **PSPO 849: Out Patient Pharmacy Complex Dosage Not Selecting Correct Number of Capsules in the SIG (PSI-08-021, Remedy 203642, 232325, CQ 16957)** – Previously, when CPRS looked up dispense drugs, it used an internal entry number to identify the drug. However, the look up used the idea of “contains” instead of matching the entire number. For example, if two dispense drugs were returned, with number such as 236 and 2361, and both had the same dosage, the code, when looking for 236, might accidentally match 2361 because they both contain the digits 236.

Resolution: Developers changed CPRS to ensure that it will no longer mismatch the IEN numbers by avoiding the “contains” scenario. It should now match correctly.

- **PSPO 850: Using (IMO) and Appt Crosses Midnight, Appt. Not Available to Order Unit Dose Med in CPRS (PSI-07-117, Remedy 243000, 197489, CQ 15188, 10767, 17125)** – Previously, if a user began entering orders in an Inpatient Medication for Outpatient (IMO) clinic, such as an emergency room situation, before midnight and then tried to enter orders after midnight, the user could not place the unit dose orders.

Resolution: Developers changed CPRS so that when a user selects an encounter, the user can enter an order up to 23 hours in the past or if the user makes the encounter

NOW, the user can enter orders up to 23 hours in the future. This should enable users to handle situation where the appointment begins on one day and ends on another, such as Emergency Room situations.

- **PSPO 852: Incorrect Med Routes Display for Dispense Drug (PSI-08-026, CQ 17783)** – Previously for Unit Dose orders, CPRS displayed all medication routes for the dosage form of the orderable item as possible med routes the user could select. Even if an orderable item is only to be given as intramuscular (IM), the provider was able to select a potentially inappropriate medication route of subcutaneous (SC) or intravenous (IV).

Currently, for infusion orders, if there were more than one orderable item on the order, no default medication route was being denoted as a default in the CPRS selection list—even if all the orderable items on the order share the same default med route.

Resolution: CPRS developers changed how the unit dose medication routes work. Unit dose orders now call Pharmacy to get the correct medication route and designate the default medication route. This issue is resolved by OR\*3.0\*280 and PSS\*1.0\*140

For unit dose orders, the following apply:

- a) If a default medication route is defined in the orderable item file, CPRS displays only the default medication route for the Unit Dose orderable item in the medication route selection list.
- b) If there is no default medication route defined for the orderable item, CPRS displays all possible medication routes for the dosage form to the provider for selection.
- c) If there is only one possible medication route, it will be used as the default.
- d) If a medication route name or its abbreviation is not included in the selection list, a user may type it in.

For infusion orders, the following rules apply:

- a) If all of the orderable items on the order have the same default medication route defined, designate the default med route in the selection list in CPRS.
- b) If one or more orderable items on the order have different default medication routes, no medication route in the selection list will be denoted as the default.

- **PSPO 853: Update CPRS GUI User Guide to Enhance Current Functionality Description of the Remove Pending Notification Button (PSI-08-027, CQ 18988)**

Resolution: The *Computerized Patient Record System (CPRS) User Guide: GUI Version* was updated to include a warning about removing pending notifications.

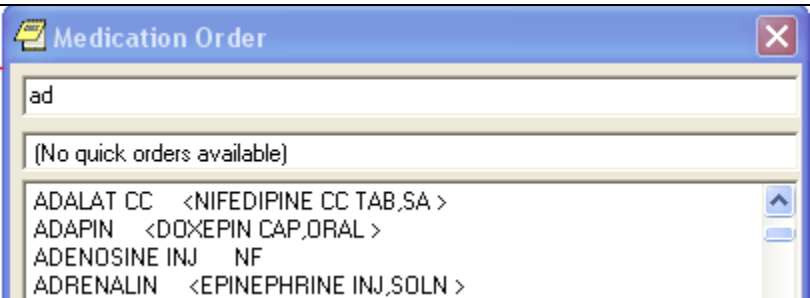
- **PSPO 908: Due to Single Spacing of the CPRS Medication List, Provider Selected Wrong Medication (PSI-08-086, Remedy 251162, CQ 17241)** – A provider ordered the wrong medication for a patient. The root cause analysis at the site decided that because of the single spacing of the medications in the selection list, a provider could select the incorrect medication.

Resolution: Several options to improve the selection list have been considered. Some of these items may be included in future releases of the CPRS and Pharmacy packages. As an immediate step, the cognitive engineers from the Patient Safety Group advised CPRS developers to add a small amount of space between the dialog

caption and the field where the selected medication is displayed. This change was made to Inpatient, Outpatient, and Non-VA Medication order forms. See screen captures below:

Screen capture of Medication Order Form before the space was added.

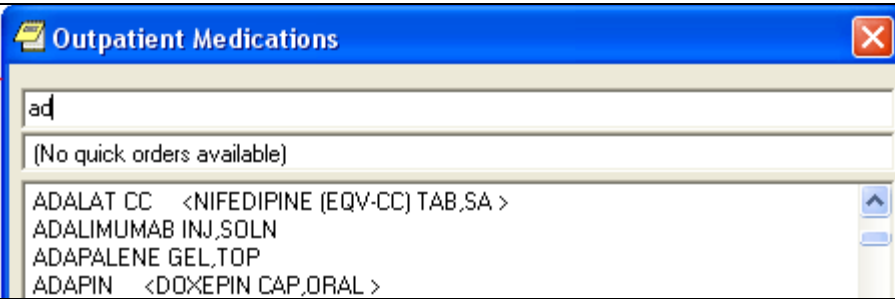
Space before change. →



The screenshot shows a window titled "Medication Order". At the top is a search bar containing the text "ad". Below the search bar is a list of medication suggestions. The first suggestion is "ADALAT CC <NIFEDIPINE CC TAB,SA >". The second suggestion is "ADAPIN <DOXEPIN CAP,ORAL >". The third suggestion is "ADENOSINE INJ NF". The fourth suggestion is "ADRENALIN <EPINEPHRINE INJ,SOLN >".

Screen capture of Medication Order form after space was added.

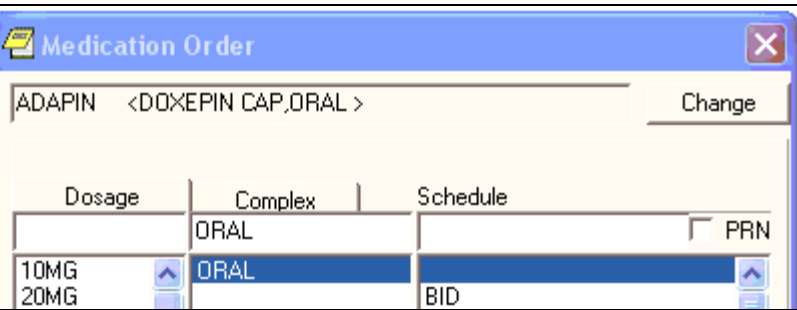
After space added. →



The screenshot shows a window titled "Outpatient Medications". At the top is a search bar containing the text "ad". Below the search bar is a list of medication suggestions. The first suggestion is "ADALAT CC <NIFEDIPINE (EQV-CC) TAB,SA >". The second suggestion is "ADALIMUMAB INJ,SOLN". The third suggestion is "ADAPALENE GEL,TOP". The fourth suggestion is "ADAPIN <DOXEPIN CAP,ORAL >".

Screen capture of second Medication Order form before space added.

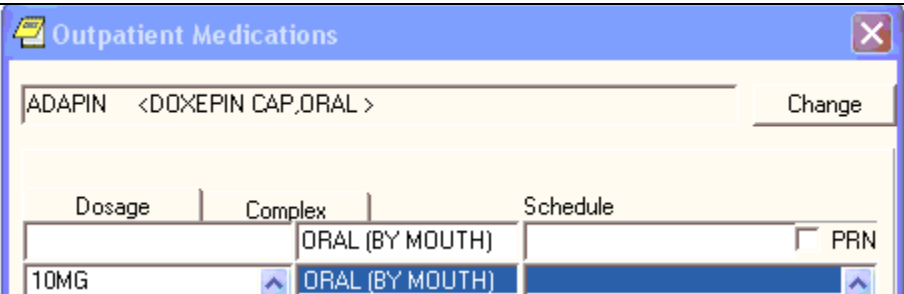
Before space added. →



The screenshot shows a window titled "Medication Order". At the top is a search bar containing the text "ADAPIN <DOXEPIN CAP,ORAL >". To the right of the search bar is a "Change" button. Below the search bar is a table with three columns: "Dosage", "Complex", and "Schedule". The "Dosage" column has two rows: "10MG" and "20MG". The "Complex" column has two rows: "ORAL" and "ORAL". The "Schedule" column has two rows: "PRN" and "BID".

Screen capture of second Medication Order form after space added.

After space added. →



The screenshot shows a window titled "Outpatient Medications". At the top is a search bar containing the text "ADAPIN <DOXEPIN CAP,ORAL >". To the right of the search bar is a "Change" button. Below the search bar is a table with three columns: "Dosage", "Complex", and "Schedule". The "Dosage" column has two rows: "10MG" and "10MG". The "Complex" column has two rows: "ORAL (BY MOUTH)" and "ORAL (BY MOUTH)". The "Schedule" column has two rows: "PRN" and "PRN".



- **PSPO 921: If Font Size Is OTHER THAN 8 in CPRS GUI, Critical Order Checks May Not Display Correctly (PSI-08-096, Remedy 253732, CQ17160, 17308)**

Resolution: Developers corrected this problem and the order checks should now display correctly at all font sizes.

- **PSPO 1087: Order Prints at Old Location (Remedy 277718, 280707, 284718, 29171, CQ 17760)** – If a user placed an order at one location but did not release the order, and then the patient is transferred and the user subsequently signed the order, the order prints at the old location, not the new one.

Resolution: Developers corrected this problem. The order prints to the appropriate location.

- **PSPO 1149: Admin Time of Complex Inpt Order May Be Used for Next Part of Complex Order (Remedy 281683, 279780, 284786, CQ 17754)** – When the user created a complex order with at least two lines and assigned different schedules to each line, CPRS made the second line have the same schedule as the first line.

Resolution: Developers corrected the error; each line has its appropriate schedule.

- **PSPO 1157: Non-VA Meds Displayed on CPRS Orders Tab-Custom Order View-All Non-VA Meds, but Not on CPRS Meds Tab (Remedy 285601, CQ 17777, 18137)** – Previously, it was difficult for the user to know what date range the medications displayed on the Meds tab represented. This caused the user to think the Non-VA Meds were not displaying correctly, but the cause was the date range.

Resolution: Developers added a generic message to the Meds tab if the date range is not defined: “To set a specific date range go to Tools | Options | Other Parameters”. If the date range is set, the message shows the date range: (7/1/09-8/15/09) for example. In most cases, users should use relative dates, such as T and T-120, for these dates when putting them in the Tools | Options dialog. If the user puts in specific dates, the dates will stay even if the user changes patients. The specific dates will not change until the user changes them.

- **PSPO 1187: Short-term—Reword the “Pop-up Box” to Make the Tubefeeding Order Clearer to the User (Remedy 290535, CQ 18407)** – The Diet and Tubefeeding dialog could be confusing. The validation and warning pop-up dialog needed rewording to help the user know what was wrong and how to correct it if the order was entered incorrectly.

Resolution: With input from field users, developers changed the wording and formatting of the pop-up dialog, including using examples.

- **PSPO 1426: Patient Inquiry Displays Different Patient Info (CQ 18425)** – Previously, if the user selected the Patient Inquiry button and then before the information loaded, the user tried to open a different patient’s record, it was possible

that the new patient's record could load and then the patient inquiry data would load, but it would be for the previous patient.

Resolution: This problem was created because two processes were trying to do something at the same time. The patient inquiry information was unable to finish before the new patient chart was loaded. Developers changed CPRS to change the cursor to an hourglass and disabling the Select New Patient menu item until such time as the Patient Inquiry information had returned.

- **PSPO 1525: Category II Patient Flags Are Not Displaying in CPRS (Remedy 352337. 35820, CQ 18837)** – There were some slight changes to the display of Patient Record Flags with OR\*3.0\*296, the previous version of the CPRS GUI. The change caused concern at some sites that some user might not notice some patient record flags that the user might need to scroll down to see.

Resolution: Developers added a splitter bar between the two categories of patient record flags so that the area can be resized. Also, after the label “Category II Patient Record Flags”, developers added the number of flags displayed under the category (for example, the label might read: Category II Flags: 2 Item(s)).

## Known Issues

---

CPRS GUI version 28 has no known issues.

## New Functionality

---

### Consults

#### **Add Earliest Appropriate Dates to CPRS Consults Ordering (NSR 20051008, CQ 10230)**

CPRS added an earliest appropriate date to the Order a Consults dialog. This date can then be used to track how quickly consults are completed. The Consults Performance Monitor report will now use EARLIEST APPROPRIATE DATE in place of DATE OF REQUEST when calculating if requests are complete within the 30 and 60 day date ranges. The Orders tab detailed display, form SF 513, and Consults tab detailed display have been updated to show Earliest Appropriate Date.

At the request of prosthetics users, the earliest appropriate date does not apply to services that are defined as prosthetics consult services.

#### **Eligibility Marker Display in Consults: OEF/OIF, Active Duty, and Service Connection (NSR 20060203, CQ 18061, 18062)**

Clerks were having difficulty scheduling appointments with the proper priority because they lacked information about the patient's characteristics. The request was therefore to add the following information to the SF-513 and to the consult detailed displays:

- Service in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF)
- Active Duty status
- Service connection conditions and rating

### Notes

#### **Class 3 to Class 1: CPRS - Number of Notes "Add Total Count of Notes" for Progress Notes (NSR 20080314, CQ 18884)**

On the Notes tab, CPRS displays a label over the Notes tree view, for example, Last 100 Signed Notes, but CPRS did not indicate how many total notes the patient had.

Developers took functionality developed at a site and incorporated it into CPRS. Now, after the label above the Notes tab tree view (for example, Last 100 Signed Notes), the number of total notes is displayed, for example, (Total: 20).

### Order Checks

#### **Drug Dosage Order Checks Added to CPRS v.28 (Pharmacy Reengineering Support)**

CPRS now sends information to Pharmacy to enable the checking of medication dosages prescribed for patients. This order checks occurs when a user accepts an order. The dosage order check settings are centrally controlled by the generically defined "DRUG DOSAGE" entry in the ORDER CHECKS file. There are three order checks that are part of the generic Dosage Order Check:

- **Maximum Single Dose** is caused by the dosage of a single administration being above a therapeutic level for the specific drug. Patient factors such as height and weight can be included in determining the appropriate level for the drug.

- **Maximum Range Dose** is caused by the combined dosage during a period of time being above or below a set range for the specific drug being ordered. Patient factors such as height and weight can be included in determining the range for the drug.
- **General Dosing Information** can display when for some reason the Maximum Single Dose and Maximum Range Dose order checks cannot be performed. A few possible reasons include the following:
  - Scenario 1: Identify drugs that require a weight where patient does not have weight defined.
  - Scenario 2: Identify drugs that require a BSA ( no height or weight defined)...i.e. Etoposide PO;
  - Scenario 3: Put in an order with a schedule that does not have a frequency defined. That should also give you a general dosing range.
- **Errors and Exceptions** can occur when data is missing or some other problem came up when trying to perform the dosage checks, for example a missing route or a drug not correctly defined.

**Site-Defined Clinical Reminders Order Checks (NSR 20070103, CQ 18334)**

Site-defined Clinical Reminder order checks enable sites to use reminder functionality, both reminder terms and reminder definitions, to perform checks for groups of orderable items. The site defines orderable items groups and then rules to check when the user selects Accept for that order. As part of the order check, the site also defines the text that CPRS will display when the order matches the rule. The displayed text may give the ordering clinician advice on how to proceed or a warning that the site determines will help providers during the ordering process. The text can also include Text Integration Utility (TIU) objects.

Sites can place orderable items in more than one group based on the rules that Clinical Reminders will use against the groups.

Two considerations when implementing site-defined Clinical Reminder order checks include system performance and file maintenance.

- Using a large number of reminders in the order check process could have an effect on system responsiveness.
- The Reminder Order Check file, file #801, stores a pointer to an entry in the Orderable Item file, file #101.43. Because the order checks use orderable items, but the changes to the Orderable Item file do not automatically make changes to the Reminder Order Check file, Clinical Application Coordinators (CACs) or similar personnel at your site will need to manually maintain this file.

**Note:** See the *Clinical Reminders Manager Manual* for more information on Reminder Order Checks.

## **Orders**

### **Add New IV Additive Frequency Field to Infusion Dialog**

To support the Pharmacy Reengineering (PRE) project, CPRS developers added a new Additive Frequency field for continuous infusion orders in the Infusion Order dialog. The Additive Frequency field's purpose is to help the provider communicate into which bag or bags the pharmacist should place the additive and enable minimum and maximum daily dosage order checks to occur based on the additive quantity and additive frequency.

In this field, the user can select one of three choices:

- **1 Bag/Day** – The additive should be put in a single bag for the defined duration.
- **All Bags** – The additive should be placed in each bag.
- **See Comments** – This choice is to enable the provider to give specific instructions to the pharmacist instead of the other choices. Because it does not enable CPRS to calculate a dosage, it is not possible to do the minimum and maximum daily dosage order check.

## Defect Fixes

---

### About CPRS

- **Help | About CPRS Display with Information on How to Log a Remedy Ticket and Remove Reference to Email Address (CQ 18721)** – Previously, CPRS changed the splash screen to remove a reference to email address that is no longer monitored and instead direct users to contact their local support desk if they need help. The same change needed to be made to the About CPRS dialog that displays when a user selects Help | About.

Resolution: Developers made this change to the About CPRS dialog.

### Allergies

- **OK Button Erroneously Becomes Disabled on Allergy Dialog when Specific Steps Are Followed (Remedy 153279, CQ 15770)** – Previously, if the user did the following specific steps, the user could produce this problem of the OK button being greyed out:
  - a) Select a patient that has not had an allergy assessment.
  - b) Enter a new allergy.
  - c) Check the 'no known allergies' check box.
  - d) Then uncheck.
  - e) Notice that the OK button is grayed out, even after performing a search.

Resolution: Developers changed CPRS to correct this problem. If the user performs a search after the prior mentioned scenario, the OK button should be enabled.

- **Marking Allergy Entered In Error Crashes CPRS (CQ 18650)**

Resolution: Developers corrected this problem. This was fixed along with some other issues when some allergy related dialogs were made non-modal.

### Consults

- **Can Order Consults to a Disabled Service / Specialty (Remedy 69788, CQ 15781)** – Previously, if a quick order was set up before the service or specialty was disabled, users could place a quick order to a disabled service or specialty.

Resolution: Developers corrected the problem, and users can no longer order to a disabled service or specialty through a quick order.

- **Can't Name a Consult Quick Order the Same Name as a Consult Service or It Fails to Function (Remedy 70920, CQ 15782)** – This problem involved 2 issues. First, if the site created a quick order (QO) with the same name as a service or specialty, then the user selected the QO, the user could not finish ordering the QO. The software could not resolve the name of the Consult Service as the QO entry would be encountered first. Second, when a QO with the same name as a Service Consult existed, the Service Consult did not load in the selection list.

Resolution: Developers corrected both issues.

- **When Saving a Quick Order, the Consult Quick Order Definition Can Have Left Over Text (Remedy 138939, CQ 15783)** – Previously, this problem could occur when a user was saving a consult quick order. If the quick order initially had text in the Reason for Request field, but the user had removed the text, CPRS incorrectly saved the quick order with the text even though the field was blank when the quick order was saved. The problem would not appear until a user placed the quick order.

Resolution: Developers corrected this problem and the text should be cleared appropriately when it is removed from the Reason for Request field.

- **Building the Consults Service Tree (Remedy 143621, 160573, CQ 15784)** – Previously, CPRS could take between 15 to 60 seconds to build the Consults tree if the site had a large number of consults.

Resolution: Developers corrected this problem.

- **On a Consult Request, There Is No Indicator of Which Consult Request Is Being Completed (Remedy 69525, CQ 15785)** – Previously, when the user was doing a clinical complete on a consult, there was no indication of which consult the user was completing. The consults tree view was grayed out.

Resolution: Developers corrected this problem. When taking an action, such as completing, writing a note, or scheduling, etc., the consult on which the user is taking action will be the only consult selected in the tree view.

- **Cosigners Can't Addend Unsigned Consults on Consults Tab, but Can on Notes Tab (Remedy #70163, CQ 15786)**

Resolution: Developers corrected this problem. Cosigners can addend an unsigned consult on both tabs.

- **Consults: Can't View Consult Details from the Consults Tab (CQ 17586)** – When the user was writing a consults note on the Consults tab, the user was unable to view the details of the consult while writing the note.

Resolution: To enable the user to view the consults details, developers added the View Consults Details to the right-click popup menu. If the user is writing a note and right-clicks on the note, the user can select the View Consults Details menu item that will display the consult details. The user can then close the detail window and continue writing the note.

- **Consult “Reason for Request” Scrollbar Limitation (Remedy 337505, CQ 18623)** – Previously, there was a problem with the scrollbar not working properly in some text boxes. If the user entered text that went beyond the bottom of the Reason for Request box, the scrollbar did not work properly. Sometimes the scrollbar did not display and sometimes it did display, but not correctly.

Resolution: Developers corrected this problem and the scrollbars should work correctly.

- **Consult Templates Producing Pointer Errors (CQ 19137)** – Previously, if a user placed an order set with a Consult or Procedure containing a template for the first item and then the user canceled the order set before the template was complete, CPRS gave an error.

Resolution: Developers corrected this problem.

- **Consult Edit/Resubmit Form Missing Resubmit/Cancel Buttons (CQ 19228)**

Resolution: Developers corrected this problem.

- **Button Layout on Procedure Edit/Resubmit Form (CQ 19229)** – There was a problem with where the buttons on this form were displaying.

Resolution: Developers corrected this problem.

## Debugging Tools

- **Change RPC Log to Display Based on Command Line Parameter instead of XUPROGMODE Key (CQ 17922)** – Previously, to see the remote procedure calls (RPCs) that CPRS had made from the Help menu, the user needed to have the XUPROGMODE key. Even with this key, the user could only see the last ten RPCs. If the user did not have the XUPROGMODE key, the user could use the command-line switch SHOWRPCS, but the RPCs would flash by very quickly on the bottom of the CPRS window as CPRS made the calls—making it difficult to see and remember them.

Resolution: To improve the debugging capability of CPRS, developers changed how the SHOWRPCS command-line switch works. SHOWRPCS now makes the debugging tools available from the Help menu. Now, any user that puts the command-line switch SHOWRPCS in the shortcut to the CPRS executable can then user the Last Broker Call menu item to view the last 100 RPCs.



## Electronic Signature

- **Signature Form Not Appearing in One Encounter Switch Scenario (CQ 18121)** – Previously, the following scenario created a problem where the signature form did not display when it should have:
  - a) Select an outpatient; set the visit to a clinic location.
  - b) Write event delayed orders for an inpatient event but do not sign.
  - c) Admit the patient to trigger the release event.
  - d) In CPRS, select the order, then right-click the order
  - e) Select Sign.

The user then had to right-click and select Sign a second time.

Resolution: Developers changed CPRS to ensure that the signature dialog box displays when it should.

- **Signature Box Doesn't Wrap Text Properly with Non-VA (Remedy 246721, CQ 18264)** – The text on the signature box was not wrapping correctly with Non-VA medications.

Resolution: Developers changed CPRS to wrap the text correctly.

## Encounter

- **Clinic/PCP Text Scrolling Off Screen (Remedy 259143, CQ 18169)** – Previously, there was a strange problem where the text on the Encounter Location and Provider button would move up and off the button when users clicked or double-clicked the button several times.

Resolution: Developers identified and corrected the problem so that the text should display appropriately.

## Event-Delayed Orders

- **<UNDEFINED> AUTH+2^ORWDPS32—M Error when Adding to Delayed Orders (CQ 17369)** – Previously, when a user who has neither the PROVIDER nor ORES key and they are trying to write a medication order for existing delayed orders, CPRS displayed this error: <UNDEFINED> AUTH+2^ORWDPS32.

Resolution: Developers corrected the problem and CPRS no longer gives this error in this circumstance.

- **Some EDO Orders Appear to Vanish under Particular Circumstances (CQ 18392)** – Under specific circumstances and during the signature process, delayed orders seem to disappear although the orders have not gone away. To see this, the user would have to do the following:
  - a) Select an outpatient.
  - b) Write (but do not sign) event delayed orders for an admission event.
  - c) Admit the patient and trigger the release event.
  - d) Right-click the order.
  - e) Select Sign.

You get a warning about how the release event has occurred (as expected). However, the signature dialog did not display nor was the event category listed in the View Orders pane.

Resolution: Developers corrected this problem. The signature dialog now displays when appropriate.

- **Data Dictionary for 100.5, Field 2, Description Needs to Be Updated (CQ 18673)** – The description for this field was slightly unclear.

Resolution: Developers updated the description of this field.

## General Dialog Displays

- **Text Display Forms Present Double Scroll Bars under Some Conditions (Remedy 348473, CQ 18715)** – Previously, if a user shrunk text dialogs to a small size, CPRS displayed double scroll bars.

Resolution: Developers added a minimum size constraint so that the problem did not appear.

## Graphing

- **Range Check Error Generated in Graphing When High User DUZ Values Are Used (Remedy 216970, CQ 15852)** – Previously, if users had high values for their DUZ (an internal identification number that CPRS uses), CPRS sometimes experienced range check errors in conjunction with graphing.

Resolution: Developers corrected this problem and users should no longer see the range check errors.

- **Anomaly in CPRS Graphing Tool (Remedy 336061, CQ 18609)** – Previously, if a user set up a view in the graphing tool and saved the view, the name of the test changed to a patient name (not that of the patient's chart the user was in). The patient name also displayed under View Definitions. The problem was that CPRS was replacing the internal number CPRS uses for the test with an internal number identifying the patient.

Resolution: CPRS developers corrected the problem and the appropriate name displays.

- **Graphing: High/low Reference Ranges Listed for Labs when Graphing Shows Incorrect Range (Remedy 300452, CQ 18174)** – Previously, the graphing reference ranges displayed by CPRS are the current ranges. The ranges in the detailed display were correct.

Resolution: Developers corrected the problem by having CPRS display the same test with different reference ranges on different graphs.

## Internal File Access

- **OR Recommended Changes for ICD and ICPT File Access (CQ 18180)** – Previously, packages were doing direct global reads to get ICD and ICPT data from File 80 and File 81.

Resolution: Following recommendations, the CPRS developers changed the direct global reads to API calls.

## Lab

- **Labs Tab: "Go to Top"/"Go to Bottom" do not function on the lab Cumulative Window (CQ 17112)** – Users reported that the Go to Top and Go to Bottom menu items did not work. Upon researching the problem, developers discovered that Freeze and Unfreeze items were also not working correctly.

Resolution: Developers corrected this problem and these menu items now work correctly. Developers also made changes to the Reports tab to make the changes consistent between the two tabs.

- **Labs Tab Adjustable Divider Becomes Fixed (Microbiology and Anatomic Pathology) (CQ 17547)** – Previously, when a user went into CPRS, navigated to the Labs tab, and viewing Microbiology or Anatomic Pathology data, CPRS displayed an adjustable splitter bar that the user could adjust relative to the list of accessions available for display. However, if the user selected a different tab or report and then returned to the Microbiology or Anatomic Pathology display, the splitter bar dividing the window is not selectable or movable. It remained fixed where the user left it when moving to another tab or report.

Resolution: Developers corrected this problem and the splitter bar would stay active (movable) for the life of the session.

- **Lab Worksheet: Make Selection of Lab Group then Select Remove All—Cannot Reselect Group Previously Highlighted (CQ 18096)** – When using the worksheet, if the user made a selection of a lab group and then selected Remove All, the user could not reselect the lab group that the user already highlighted.

Resolution: Developers corrected this problem, and users can now reselect the lab group.

- **CPRS Printing of Lab AP Reports Truncation (CQ 18128)** – Previously, when printing Anatomic Pathology reports, the line was too long and was truncated. In this case, the accession number was truncated, making it difficult to know what the correct number was.

Resolution: CPRS developers removed two spaces that preceded the text in each line. As a result, the full line should display correctly.

- **Lab collection issues in CPRS (Remedy #275554, CQ 18473)** – Previously, in the lab ordering dialog, the collection sample window did not expand to help users select items that began with similar words. For example, if a user tried to order a lab test for blood gas by selecting arterial or venous or mixed, it was difficult because each item at a site might start with “PORTEX SYRINGE”.

Resolution: Developers corrected this problem.

- **Lab: Patient Has Lab Results in Most Recent Results but Label Contains “No Lab Results” (CQ 18553)** – Previously, if a patient had only one lab collection without result, the label would read, “NO LAB RESULTS”, which could be confusing.

Resolution: Developers corrected this problem.

- **Anatomic Path Reports Disappearing (Remedy 308138, 301412, CQ 18267, 18268)** – Previously, if a user were viewing information on the Labs and Reports tabs, CPRS could get confused and not clear variables as it should. The result was that information might not be displayed or information from the previous tab might be displayed.

Resolution: Developers corrected this problem. As the user switches between the Labs and Reports tabs, CPRS clears the appropriate variables and the correct information is displayed.

**Note:** This item is duplicated under the Reports heading because it affects both tabs.

- **Labs: Date Range Display Issue (CQ 18600)** – When user set the date range, CPRS GUI is filtering and displaying the data correctly—except in the date range at the top of the results pane. This issue affected the All Tests by Date, Selected Tests by Date, Worksheet, and Lab Status reports. The Microbiology report handled the date ranges correctly.

Resolution: Developers corrected this problem and the date range at the top of the results pane now displays correctly.

- **LR 395 Change Most Recent Lab Results to Lab Status (CQ 18648)** – Site reported that although the specimen has only been accessioned (Collected - Specimen in Lab), the label “Most Recent Lab Result” can be misleading, and perhaps the column heading of “Result” should it say “Status” instead.

Resolution: Developers made the following changes to clarify what users are seeing. Developers modified the Most Recent Lab Results label to read Most Recent Lab Data. Developers changed the Result column header in Most Recent Report to Result / Status, and removed the Laboratory Result text in header label to make consistent with Reports Tab Functionality.

- **LR Display Status: Add Oldest, Previous, Next, Newest to Most Recent Buttons Back/Forward Symbols (CQ 18798, NSR 20070438)** – Previously, the button to move the Oldest, Previous, Next, and Newest were simply arrows on the buttons. There was no other visual cue to tell the users what the buttons did.

Resolution: Developers put the appropriate words on the appropriate buttons: Oldest, Previous, Next, and Newest.

- **LR Display Status: Most Recent Report Should Not Display the Date Twice at Top of Display Page (CQ 18799, NSR 20070438)** – Previously, CPRS displayed the date twice on the top of the Most Recent report in labs.

Resolution: Developers removed the redundant date.

- **LR Display Status: Most Recent Report Change Result Columns to Add Collected Date/Time First (CQ 18800, NSR 20070438)** – Previously, the Most Recent lab display did not have a column for the date and time collected.

Resolution: Developers added a new column for the Collection Date/time at the beginning of the line for the lab test.

- **Clicking OK on Worksheet, Get Can't Focus A Disabled Window (Remedy 364439, CQ 19075)** – Previously, when a user had worked on the Lab Worksheet and then gone to another tab and returned, CPRS would give the “Cannot Focus on a Disabled Window” error.

Resolution: Developers corrected this problem.

## Location Switch

- **Refresh Location Form Pops Up on Select New Patient (CQ 18393)** – Previously, if a patient was in an outpatient clinic and was admitted or if an inpatient was in an outpatient clinic, and the user switched patients or began to exit the chart and chose not to sign the orders, the Location Switch dialog displayed when it should not have.

Resolution: Developers corrected this problem, and the form should display appropriately.

- **Order Prints at Old Location (PSPO 1087, Remedy 277718, 280707, 284718, 29171, CQ 17760)** – If a user placed an order at one location but did not release the order, and then the patient is transferred and the user signed the order, the order prints at the old location, not the new one.

Resolution: Developers corrected this problem. The order prints to the appropriate location.

## Medications

- **Release Hold Action Not on Meds Tab ACTION Menu (Remedy 297242, CQ 17867)**

Resolution: Developers added the Release Hold items to the on the Meds tab Action menu.

## Non-VA Medications

- **Auto-accept Not Supported on Vista Non-VA Medications Quick Orders (CQ 18333)** – In previous versions of CPRS, VistA Non-VA medications quick orders showed the auto-accept prompt. At some point, the auto-accept prompt was removed for this type of quick order.

Resolution: Developers corrected this problem and the prompt is once again presented to the user (usually a clinical coordinator) creating the VistA non-VA medication quick order.

## Notifications

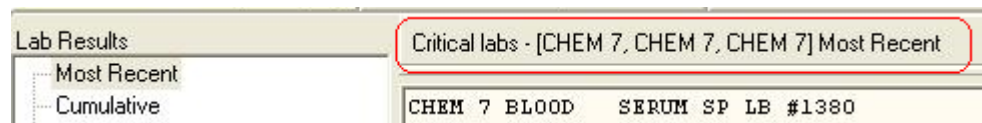
- **When Orders Are Lapsed, the Unsigned Order Notification Does NOT Go Away (CQ 17536)** – When orders lapsed, the unsigned order notification did not go away. Because it displayed in CPRS, a user could try to process the alert and be taken to a screen that did not have any action to take. The order was gone and no signature was needed.

Resolution: Developers corrected the problem. When all orders have lapsed, the notification will be removed also. If any orders that require signature have not lapsed, the notification will display so that the user can sign the orders.

- **Notifications: Lab Result Action Alert in Conjunction with a Critical Info Alert Incorporates Test Name from Previous Alerts (CQ 17548)** – When a lab result generates a CPRS Lab resulted action alert in conjunction with a Critical lab(s) action alert, the alert message incorporates the test name from previous alerts even when the same test is being alerted. For example, when a CO2 is alerted the action alert has the test name "CHEM7". If that CO2 is then alerted subsequently the follow-on alerts have the test name repeated. As shown below, the test name “Chem 7” was repeated several times:’

```
LRPATIENT (L9934): Labs resulted - [CHEM 7, CHEM 7, CHEM]
LRPATIENT (L9934): Critical lab: CO2 59 07/03 16:40
```

The problem of repeated test names also appeared on the Labs tab in the header.



Resolution: Developers corrected this problem. CPRS will now display the test name only once.

- **Missing Sort Method for Patient Alerts Causes Access Violation (Remedy 311909, CQ 18250)** – A user was constantly getting an access error when logging on to every computer. The problem was that the site had deleted the PACKAGE and SYSTEM level parameter setting for the ORB SORT METHOD parameter. Because the user did not have a user level setting, the access error occurred.

Resolution: Developers corrected this problem by making the Date/Time sort method the default if the parameter does not have a value set at the user level.

- **Pt Selection Dialog: Double-Clicking on Notification Does Not Go to Pt. Chart until Mouse Is Moved (CQ 18657)** – Previously, if a user double-clicked on an alert or notification from the Patient Selection screen, CPRS did not go to the patient chart until the user moved the mouse.

Resolution: Developers corrected this problem and double-clicking on a notification or alert does go to the chart whether the mouse is moved or not.

## Order Checks

- **Flaws in “No Allergy Assessment” Order Check (CQ 9875)** – In the Order Check window, it was difficult to know which order check was requiring a reason for override.

Resolution: The Order Check in blue is the one that needs a reason for override.

- **Differentiate Order Checks from One Another when Multiple Order Checks Are Displayed (CQ 15323)** – Previously, the order check display could be somewhat busy and confusing.

Resolution: To improve readability, developers removed the underlining that was on order checks, added a blank line between each one, added a number for each (e.g., 2 of 6), and made the window taller.

- **Initiate “No Allergy Assessment Order Check when Order Is Signed (CQ 13525)** – Previously, if a user wrote and order but did not sign it, and then entered a “No Known Allergy” assessment, CPRS had already stored that no assessment was done. Therefore, when the order was signed, CPRS displayed the warning that the patient needed an allergy assessment.

Resolution: Developers changed CPRS to check for an allergy assessment when the order is signed as well and when the user begins entering orders. Therefore, if the user completes the assessment between the time the user accepts the order and the time the user signs the order, CPRS does not display the order check.

- **Order Check: Reason for OC Not Displayed in OC Message Text (No Allergy Assessment) (CQ 17384)** – In this case, the patient allergy status was “not assessed”. When the user entered an order, CPRS displayed the order check dialog, but there was no reason in the text stating what the order check was.

Resolution: Developers corrected a height limit on the display and the text will now display correctly.

- **When Multiple Order Checks Are Displayed, It Is Difficult to Distinguish Each Order Check (CQ 18391, 18589)** – This is similar to CQ 15323. The users asked to have an improvement.

Resolution: To improve readability, developers removed the underlining that was on order checks, added a blank line between each one, added a number for each (e.g., 2 of 6), and made the window taller.

- **NVA Auto-accept Quick Orders Do Not Generate Order Checks (CQ18692)** – Non-VA Medication auto-accept quick orders were not generating the appropriate order checks.

Resolution: Developers corrected the problem and the Non-VA Medication quick orders should now have the appropriate order checks.



- **Order Checks: #4 Mark or Split Up Order Checks that Caused Justification Necessity (CQ 16782)** – Users asked for changes to the order check display to make it clearer to users. In this case, the request was to separate and make it clearer which order check requires a reason for override justification.

Resolution: Developers changed the CPRS order check display to show those items that need an override reason are displayed in blue, labeled as high severity, and are at the top of the group of order checks.

- **Caret Special Character Not Being Edited Out in Order Check Justification Text Area (CQ 18890)** – Previously, the up caret (^) could be placed in the text area for the order check justification. This created some problems with strange characters being displayed.

Resolution: Developers added a check to CPRS so that the caret can no longer be placed in the order check justification text area. If the user does place a caret there, CPRS displays a warning message informing the user that the character is not allowed.

- **Polypharmacy OC - Location Parameter Customization Suggestion Does Not Work (CQ 19119)** – During testing, test personnel discovered that the customization suggestion of the ORK PROCESSING FLAG was not correct.

Resolution: Because the suggestion was not working, it was removed from the manual.

- **Help Text Is Confusing Regarding Schedule Type (Quick Order) (CQ 19610)** – Previously, there was some confusion regarding some help text in the Quick Order Editor. As it turned out, the problem was not with the help text, but with the way the order validation was working. Instead of verifying the schedule type on the specific schedule entered, it was evaluating all schedules with a similar name. For example: ON CALL was looking at ON CALL, ON CALL ABC and ON CALL XYZ.

Resolution: The validation was changed so that it now only evaluates the specific schedule selected for the order.

## Order Dialogs

- **Diet Orders: Prevent Tube Feeding Orders from Accepting C and CC Values, Enforcing M for ML Values, and Change Messages (Remedy 146664, CQ 15833)** – CPRS used to accept cubic centimeters (cc) in the quantity field, but it was inappropriate to do so. Although it was not appropriate, the dialog that CPRS displayed it something was missing or inappropriately entered mentioned CCs as well.

Resolution: Developers changed CPRS to automatically convert CCs into milliliters (ml). Developers also changed the text in the order dialog to remove the reference to cubic centimeters.

- **Can't Do Long List Scroll Up on Additives List, on IV Order Dialog (Remedy 138908, CQ 15867)** – In the Infusion Order dialog when either the additives or solutions list contained more than 44 items, a problem could occur with navigating the list. If the user moved to the bottom of the list using the arrow keys and then tried to return to the top of the list using arrow keys, the list would not move back up.

Resolution: Developers corrected the problem with the lists.

- **Change Order's Tab Provider Column to Include the Entire First Name of the Provider (Remedy 69185, CQ 15915)**

Resolution: Developers changed the Order tab so that the provider's last and first name both display.

- **Select Blank Line and Return to the Orders Tab with No Changes (CQ 16929)** – Previously, CPRS allowed users to select a blank line or a black line from lists.

Resolution: Developers changed CPRS so that if the user selects something invalid, such as a blank or black (dividing) line, CPRS displays a message and returns the user to the list for a valid selection.

- **If Medication Order Dialog Width Is Shrunk Down Too Small, Pick-Up Values Will Overlap Days Supply and Quantity Fields (CQ 17324)**

Resolution: Developers corrected this problem by establishing a minimum width. With a font size of 18 point, there may still be some overlap, but the fields are still usable.

- **Charleston: ACCEPT Button on Opt Order Dialogs Floats (CQ17367)** – Previously, the Accept button on the Outpatient Order dialogs did not adjust appropriately. It appeared to move over part of the dialog where it should not have been.

Resolution: Developers made a change that should help the Accept button be in the right location. There may still be some overlap at the 18-point font size, but it should not interfere with the dialog's function.

- **Orders Tab--Move up the Write Delayed Orders Row covers up View Orders/Active Orders Section (CQ 17440)** – Previously, the user could adjust the dialog, moving up the Write Delayed Orders row, which then covers up the View Orders/Active Orders section. Users had to log off and relaunch CPRS to correct this problem.

Resolution: Developers corrected this problem. The user can no longer cover up the other part of the dialog.

- **Unable to Renew Order Message Not Grammatically Correct (CQ 17443)** – Previously, there was a grammatical error on the Unable to Renew Order dialog.

Resolution: Developers corrected the error.
- **Vertically Stretched Generic Text Order Dialog Won't Return to Normal Size (CQ 17669)**

Resolution: Developers corrected this problem.
- **Imaging Orders: Research Pop-up Box—Selection List Is Not Selectable and User-typed Text Does Not Display (Remedy 296471, CQ 17702)** – Previously, if a user were placing an imaging order and the user selected Research, Contract, or Sharing, a dialog popped up for more information. However in the Contract/Sharing/Research Source dialog, the user could not enter text or select anything from the drop-down lists.

Resolution: Developers corrected this problem, and the user can now select from a drop-down or can type in text.
- **Order Dialog Increases in Size (Stretching from the Bottom) as the Similar Orders Are Placed (CQ 18428)** – Each time a user placed additional orders in the same dialog, the dialog would grow slightly. This was most noticeable if the user placed a large number of the same orders from the same dialog. The only way to correct the problem was to reset the Size & Position Settings for User, but then the problem begins again.

Resolution: Developers corrected this problem.
- **Lab Collection Issues in CPRS (Remedy 275554, CQ 18473)** – Previously, if a user hovered over a drop-down list selection in the Collection Sample window, a hint would display behind the drop-down list, making it unreadable.

Resolution: Developers corrected the problem, and now when the user hovers over the selection, CPRS will display a hint that shows the full text in the selection.
- **Add Clinic Infusion Orders Label to the Infusion Order Dialog (CQ 19231)** – Previously, whether the user selected the Infusion dialog for an outpatient clinic or an Inpatient Medication for Outpatient (IMO) clinic, the dialog label was the same. Test sites requested that CPRS developers change the label to help users identify that the user is writing orders for an IMO clinic.

Resolution: Developers changed the label for the Infusion order dialog when the user is ordering in an IMO clinic to Clinic Infusion Order dialog.

## Order Files

- **Nature of Order - Change SERVICE REJECT to REJECTED by SERVICE (CQ 15313)** – Previously, in the Nature of Order file, the user could select a nature of order with a single letter. In this file, the letter for SERVICE CORRECTION was “S” while the letter for SERVICE REJECTION was “R”. This was confusing to users who might incorrectly assume that “S” was for SERVICE REJECTION and choose the wrong Nature of Order.

Resolution: Developers changed the Nature of Order file so that the wording for SERVICE REJECTION is now REJECTED BY SERVICE. This should make it easier for users to pick the “R” for the correct REJECTED BY SERVICE. CPRS will only see this change in the Order Details display after an order has been rejected by service.

## Order Printing

- **Delayed Text Orders Will Be Printing at the Expected Location, Rather than the Current Location (Remedy 277146, CQ 17606)** – In CPRS GUI v.26, if a user entered delayed admission, discharge, or transfer (A/D/T) orders, the order printed in the current encounter location. With CPRS GUI v.27, the order printed in the location associated with the A/D/T orders.

Resolution: As per feedback from CPRS test sites, developers changed the print location back to the current encounter location unless there is a conflict in the patient’s location. If there a conflict in the patient’s location, CPRS displays the form that enables the user to specify at which location the orders should print.

## Order Sets

- **Access Violations when Order Sets Are Nested inside Other Order Sets (Remedy 69535, CQ 15856)**

Resolution: Developers corrected this problem. Users should no longer experience the access violation.

- **“A Component Named OMNavA Already Exists” Error (Remedy 151361, CQ 15857)** – When order sets are nested inside other order sets, and these order sets contain order menus, CPRS displayed “A component named OMNavA already exists” error.

Resolution: Developers corrected this issue.

## Orders

- **IV Meds Order Dialog Is Not Sorting the Medication Correctly (CQ 15038)** – Previously, with a long list of solutions in the Infusion Order dialog, if the user scrolled through the list, duplicate items would appear (the list would repeat itself).

Resolution: Developers corrected this problem and the list no longer repeats itself as the user scrolls through it.

- **The Character ^ Is Allowed on the CPRS GUI Side but Not the Pharmacy Side (Remedy 210792, CQ 15368)** – Previously, the CPRS GUI accepted the up caret (^) in orders and comments. This caused problems because Pharmacy did not accept these characters.

Resolution: Developers corrected this and CPRS will not longer allow this character in orders or comments.

- **Modify "Give additional dose now" Warning Message (Remedy 218153, CQ 15777)** – There was some confusion when a provider entered an inpatient order and selected the option to “Give additional dose now”, CPRS created two orders. Some providers did not understand that if they selected “STAT” for the urgency, it affected both orders. Two STAT orders confused nursing staff that were supposed to implement the orders.

Resolution: As part of the short term solution for this problem, developers added a new message to CPRS when the provider selects “Give additional dose now”. The message reads as follows:

By checking the “Give additional dose now” box, you have actually entered two orders for the same medication “*medication name*”

The “Give additional dose now” order has an administration schedule of NOW and a priority of “*priority*”.

The “Ongoing” order has an administration schedule of “*schedule*” and a priority of “*priority*”.

- **Display Text of Order Prompts (Remedy 70340, CQ 15849)** – Previously, the display text of order prompts, in generic orders, were getting cut off at the bottom of letters that hang below the line, such as y, p, g, q, etc.

Resolution: Developers corrected the problem.

- **Changing Collection Time Changes Urgency, even though Prior Value of Urgency Is Still Valid (Remedy 69266, CQ 15868)** – Previously, when the user placed lab test orders from the CPRS Orders tab and changed the urgency from Routine to another urgency and then entered the collection type, the urgency incorrectly changes back to Routine.

Resolution: Developers corrected this problem and the urgency should remain as entered.

- **Incorrect Error Message - User that Is Not Authorized to Place Med Orders (Remedy 71069, CQ 15917)** – A user that was not authorized to place medication orders tried to place medication orders in a reminder dialog. CPRS displayed a message that the **encounter physician** was not authorized to place med orders. The message should have stated that the **current user** was not being able to place med orders. The current user was not authorized, but the encounter provider was.

Resolution: Developers corrected this problem. The correct user should be in the message. This change applies to orders from order sets, quick orders, and orders from reminder dialogs.

- **Vertical Splitter above Write Orders Box Can Make View Orders List Disappear (Remedy 70260, CQ 15922)** – Previously, the user could move the splitter bar above the Writer Orders box and cover the View Orders list such that the user could not uncover it again.

Resolution: Developers corrected this problem.

- **The Quantity Dispense Message from the DRUG File Isn't Being Displayed during Complex Med Quick Orders (Remedy 71000, CQ 15933)** – The Quantity Dispense Message (QDM) did not display correctly for complex quick orders that were not auto-accept quick orders. When CPRS displayed the medication order dialog and the user clicked on the dose that had a quantity dispense message, the message did not display, unless the user clicked a different dose and then re-clicked the original dose.

Resolution: Developers changed the complex Outpatient Medication Order dialog to display a QDM when the user clicks anywhere in a row—if a QDM was defined for the selected dose. The message does not display when the quick order information first displays in the dialog.

- **Mailout or Window Status and Quantity for Some Medications Is Missing (CQ 16780)** – Previously, if an order had a SIG over a specified length, some information, such as mail out or window status or quantity, on the Orders tab did not display correctly.

Resolution: Developers corrected this problem. However, the problem can still occur if the user places an order from the Renew dialog.

- **Cancelling Reason for Request for Generic and Quick Orders Still Places Order (CQ 17871)** – For Generic and Quick orders, if the user cancelled a Reason for Request dialog, CPRS still places the order if it is Auto-Accept (all required fields already have a default as part of the quick order set up) or displays the quick order dialog if not Auto-Accept (or has not answered required fields).

Resolution: Developers changed CPRS so that if the user cancels from the template field, such as reason for request or comments, the order will not be placed regardless of whether it was auto-accept or not. This applies to all quick orders.

- **Modify TORComboBox to Prevent: Retention of Previously Selected Entry when >>entry HIGHLIGHTED >>BACKSPACE>>ENTER (CQ 18173)** – Previously, if a field, such as the Route field, had a default value, but the user wanted to change the value by highlighting it and backspacing and then pressed <Enter>. It appeared to clear the value, but the value was carried through.

Resolution: Developers corrected this problem. The combo boxes should now function correctly.

- **Order Screen Not Updating with Selected Formulary Alternative (Remedy 297310, CQ 18234)** – Previously, if the user selected a non-formulary (NF) drug and then selected a formulary alternative drug, the selected drug name might not update appropriately.

Resolution: Developers corrected the problem, and the drug name should update appropriately.

- **VistA Intermittent IV QO w/PRN Only Schedule Is Stripped from Order in CPRS (CQ 18402)** – Previously, if a user selected a VistA Intermittent IV quick order (QO) w/PRN only schedule to process, CPRS inappropriately stripped the PRN schedule from the order.

Resolution: Developers corrected CPRS so that a VistA Intermittent IV Quick Order with PRN only schedule is permitted, and CPRS displays the PRN only schedule when QO is selected for processing.

- **ADMIN Time: Not Defined for Quick Orders (CQ 18464)** – Previously, if a user selected an auto-accept quick order for an inpatient and then before signing the order, the user decided to change the order, no administration times were displayed. This would not be seen unless the user tried to change the order because as it was an auto-accept quick order, the administration times would not display.

Resolution: Developers corrected the problem. If the user selects an auto-accept quick order for an inpatient but decides to change it before signing, the administration times display.

- **List Index Out of Bounds (Remedy 321804, CQ 18474)** – Previously, when a user was trying to enter a brand name, CPRS displayed a “List out of bounds” error.

Resolution: Developers corrected this problem.

- **Ampersand in Delphi Controls (Remedy 268522, CQ 18475)** – Previously, putting an ampersand (&) in the display text of an order menu could cause problems because CPRS recognized this as a command character for Delphi.

Resolution: Developers changed CPRS so that the ampersand would be treated like a text character and not affect Delphi.

- **Duration of nDOSES for a Continuous IV QO Is Accepted and Can Be Signed in Certain Scenario (CQ 18555)** – Previously, if a user was defining an auto-accept intravenous (IV) quick order (QO), in a very specific scenario, a problem could occur that enabled the user to place a dose limitation on an intermittent quick order. When the quick order was selected in CPRS, it would then immediately show as expired.

For this scenario to occur, the user would go into the VistA quick order editor and define an intermittent quick order with a number of doses in the limitation field. But when the user came to the (P)lace or (E)dit prompt, if the user changed the IV type to Continuous, but did not edit the limitation field, the order could be incorrectly accepted.

Resolution: Developers changed CPRS to delete the duration field if the duration contains a DOSE value and the user changes the IV type.

- **Can't Save Personal Quick Orders after Clicking "Write Delayed Orders" (CQ 18660)** – When a user was writing delayed orders and then tried to save what the user had put in the dialog as a personal quick order, the user could not save the order. This was functioning correctly. However, even after getting out of the delayed order functionality, the user could not save personal quick orders. The situation was not resolved until the user closed and then launched CPRS again.

Resolution: CPRS does not allow users to save personal quick orders while writing delayed orders. However, CPRS developers corrected the problem of not being able to save a personal quick order after exiting the delayed ordering features.

- **Oddities on Form to Set Meds Tab Date Parameters (CQ 18675)** – Previously, there were problems with setting the date range on the Meds tab:
  - If the user did not enter both start and end dates, the entry is inappropriately deleted, and the parameter is not updated
  - The Date validation checker is inconsistent. Some dates (T-10y) seem to be accepted but are silently deleted; other dates generate a warning before the user is even finished typing. (For example, if the user started with a date of Feb 2, 2009, and then deleted the last two digits, CPRS displayed a warning even before the user had finished entering the date.)
  - If the user typed any two digits of the year, CPRS displayed an error message: “Start time cannot be greater than today”, which is incorrect.

Resolution: Developers corrected the warning message.



- **Discontinued Orders Don't Print to Ward in Encounter Switch Scenarios (CQ 18676, 18677)** – Previously, there was a problem with orders not printing to the ward when the patient switched location during the ordering session. The scenario causing this problem is as follows:
  - a) A user wrote but did not sign orders in an ordering session.
  - b) The user discontinued but did not sign other orders.
  - c) The user began a new session.
  - d) During that session, the patient's location changed—the patient's location in CPRS is different than the location in Vista: such as an inpatient at an outpatient clinic, or an outpatient who is admitted after the order is written but before it is signed).
  - e) When the user went to sign the orders, all orders displayed, as expected.
  - f) However, only the new orders displayed on the Encounter Switch form, and only the new orders printed. Discontinued orders should have printed at the ward location – they did not.

Resolution: CPRS now deals with orders in the following ways:

- Non-delayed orders written in previous session display in encounter switch form.
- All discontinued orders from current and previous session for non-delayed orders print at the ward location.

- **Personal Quick Orders Don't Save All Values Entered for Some Meds (CQ 18695)** – Previously, when the user saved a complex personal quick order (QO) and then selected the personal quick order, the quantity value that had been saved with the order did not fill in correctly. The quantity was set to zero. During internal testing, the development team also found that medication orders for tablets were functioning correctly.

Resolution: Developers corrected these problems with tablet orders and complex QO. With complex QO, the Days Supply will try to re-calculate. The quantity may not re-calculate depending on the medication.

- **Duration or Total Volume Field Drop-Down List Option “Doses” Populates the List Each Time the User Selects “Intermittent” (CQ 18699)** – Previously, when placing an infusion order, the Duration or Total Volume field drop-down list displayed several options (for example, L, ml, days, hours, doses). If the user selected “intermittent” for the Type, an additional doses item would display in the Duration or Total Volume field drop-down list (for example, L, ml, days, hours, doses, **doses**).

Resolution: Developers corrected this problem, and selecting “intermittent” will no longer add another “doses” item to the drop-down list.

- **Quantity Field Is Being Cleared for Certain Complex Orders when a Comment Is Entered (Remedy 348919, CQ 18722)** – Previously, if the user attempted to place a complex medication quick order that had a free-text dose and a quantity defined, CPRS would remove the quantity if the user began to change a comment.

Resolution: Developers corrected this problem. The quantity remains the same if the comment is changed, but it will recalculate if the user changes other characteristics of the order, such as the schedule or the dose. The quantity may change to zero based on what the user changes.

- **Doses Listed Twice on INFUSION DIALOG (Remedy 3404255, CQ 19032)** – Previously, if a user entered part of an IV order, canceled the order, and then reentered an order, the duration drop-down list would incorrectly display some choices twice.

Resolution: Developers corrected this problem and CPRS should display each selection only once.

- **Complex Orders: Order Detail Not Being Updated for Order Checks (CQ 19061)** – Previously, CPRS did not put the order checks from the parent order to the child orders created when the user accepts a complex order.

Resolution: Developers corrected this problem and the order check information is not transferred to the child orders.

- **Keep the Day-of-Week Schedule Field Consistent with the Other Schedule Forms (CQ 19156)** – Sites testing CPRS v.28 asked if this dialog should have the same functionality that other dialogs use where if a unique schedule is not selected and the user tabs out of the field, then CPRS displays an error message. Also, should the CTRL+ENTER functionality work for this dialog like others?

Resolution: Developers added a warning message that displays when exiting the schedule field if the schedule field does not contains a selection of non-unique schedule. Developers also added a warning message if the schedule field contains a control character. The CTRL+ENTER functionality is not and it should not be supported on this dialog.

- **IV Infusion Dialog Drop-down Problem Related to Solution/ Additive tab Switching (CQ 19220)** – Previously, when the user selected the first solution for the order and the item had more than one volume, the drop-down list would display for the user to select, but then CPRS immediately switched to the Additive tab before the user could make a volume selection.

Resolution: Developers changed how the dialog functions. The dialog will no longer switch to the additive tab if the user needs to make a volume selection. Instead, if there are multiple values or multiple defaults for the first solution selected for the order, the Volume drop-down will remain open until the user makes a selection or moves to a different part of the dialog.

- **Help Text for Intermittent & Continuous Type Orders Need to Be Edited to Make Distinction of DOSE Field (CQ 19452)** – In the VistA Quick Order Editor, after converting the Quick Order to Continuous when the user returns to the Doses Field and enters ??, the Help Text still states that DOSES can be placed into this field, which is incorrect.

Resolution: Developers corrected the Help Text.

## Parameter Changes/Additions

- **Enhance ORWOR CATEGORY SEQUENCE Parameter Definition to Include USER as a Selection (Remedy 105173, CQ 16601)** – A site wanted to be able to set up a user-level sequence to help a visually impaired user work more efficiently.

Resolution: Developers added the User-level setting for the parameter.

- **Modify the OR RA RFS CARRY ON Parameter to Include Division, Location, User, Service, System and Package Levels (CQ 16920)** – Previously, this parameter could only be set at the System level.

Resolution: As requested, this parameter was expanded to have more levels at which it can be set: Package, System, Division, Service, and User.

- **Two CPRS Parameters Have the Same Parameter Description (Remedy 69631, CQ 17700)** – A user reported that two parameters, ORW ADDORD INPT and ORWOR WRITE ORDERS LIST, had the same description.

Resolution: While researching the similar descriptions, developers discovered that the parameter ORW ADDORD INPT was no longer in use. The CPRS GUI v.28 installation will delete this parameter at sites. In addition, the developers added to the ORWOR WRITE ORDER LIST parameter description that it has been superseded by the parameter ORWDX WRITE ORDERS LIST and that it is there only for backwards compatibility.

- **VBECS: Test Site Wants a Parameter for Changing Order of Diagnostic Tests (Remedy 380789, CQ 18426)**

Resolution: Developers added a new parameter OR VBECS DIAGNOSTIC TEST ORDER to enable sites to rearrange the order of diagnostic tests at the System, Division, or User level. Sites can change sequence numbers to put the list of tests in whatever order the site chooses. The site can also remove a test from the list by deleting the corresponding sequence number.

- **Need Parameter ORWT TOOLS MENU Description Updated for Submenu Info (Remedy 162367, CQ 19054)** – With the addition of submenus to the Tools menu, the description of the ORWT TOOLS MENU parameter to reflect the changes.

Resolution: Developers changed the description to reflect the changes to this parameter.

- **VBECS QO without a Start Date Is Rejected by VBECS with a Message Sent to Provider (Remedy 379127, CQ 19097)** – Previously, if a user entered a VBECS quick order (QO) without a start date in CPRS, VBECS did not accept the order. While investigating the order, developers discovered that the start date and time was not being stored or passed to VBECS correctly.

Resolution: Developers corrected the problem and the start date will now be stored and sent correctly. Based on the collection type, the start date will have a default value, which the user can change if needed.

- **VBECS: A Site Requested a Parameter that Removes Collection Date/Time Defaults e.g., NOW (CQ 19167)** – Previously, the providers ordering blood were not paying attention to the date for collection time. The providers would place the order and the default of NOW for the collection time would be placed in the order.

Resolution: CPRS developers created a new parameter OR VBECS REMOVE COLL TIME to enable the sites to remove the Collection Time Default when entering Diagnostic Test orders. The parameter has no affect on Quick orders. Quick order values will be displayed.

- **VBECS Create a Parameter that Would Allow Sites to Change Diagnostic Side with Blood Component Side (CQ 19266)** – When the CPRS Blood Components and Diagnostic Tests Order Form dialog, some sites asked that the location on the dialog of the Blood Components panel and the Diagnostic Tests panel be switched. However, other sites disagreed and wanted them to remain as they were, with the Blood Components panel on the left and the Diagnostic Tests panel on the left.

Resolution: Developers created a new parameter, OR VBECS DIAGNOSTIC PANEL 1ST, to enable users to switch the location of the panels. This parameter can be set at the Package, System, and Division levels.

## Patient Record Flags

- **Make Close Button on Patient Record Flags Dialog a Default Button so that Enter Key Closes Dialog (Remedy 165177, CQ 15925)**

Resolution: Developers made the Close button the default. When a user selects Enter, the dialog should close.

## Patient Selection

- **Team List, Source Combination Option (Remedy 71063, CQ 15902)** – Previously, if users were creating teams using source combinations and the clinic names were formatted by site name, hyphen, and then clinic name (e.g., SL-Cardio), the clinic name displayed only the site name (SL). If all the clinics were formatted the same way, it was impossible to tell which clinics had been selected. The problem was that CPRS was treating the hyphen (-) as a delimiter, a character that tells CPRS that one item is complete.

Resolution: Developers changed CPRS to not treat the hyphen as a delimiter. The complete clinic name should now display.

- **Patient Selection Screen Does Not Maintain Column Widths between Patients (CQ 16671)** – Previously, if the user adjusted the width of the Notifications columns, CPRS did not keep the widths as the user set them when the user selected a new patient.

Resolution: Developers corrected the problem, and CPRS saves the widths of the columns as the user sets them.

- **Patient Selection Problem (Remedy 288256, CQ 18265)** – Previously, users experienced problems when using the "Creating a personal list" option in CPRS. The users could no longer enter the patient's last name and last four of the social security number to include the patient on a list. Users were required to enter the first name, last name, and middle initial as a work around.

Resolution: Developers corrected the problem so that users can now enter the patient's last name and the last four digits the patient's social security number to include the patient on a personal list.

- **CV Not Clearing in Patient Demographics When Changing Patient List (CQ 18429)** – Previously, when a user highlighted a patient name, the associated information displayed on the Patient Selection screen—including Combat Veteran status, if appropriate. If the user chose to find a different name without opening the record and selected a category, such as Ward, the Combat Veteran status continued to display when it should not have.

Resolution: Developers corrected this problem and the Combat Veteran status now updates appropriately.

- **Access Violation on Patient Selection (CQ 18540, 18544)** – The access violation occurred when the user **double-clicked** the Select New Patient under File menu. The user should have just clicked once. In this case, the second click activated the Patient Inquiry form, and then the user was selecting select a new patient from that form. The same type of problem occurred when the user double-clicked File | Review/Sign Changes....

Resolution: Developers corrected this problem by changing CPRS to complete the patient selection process or Review/Sign Changes... process before the patient inquiry can be activated.

## Postings

- **Postings Dialog Freezes Sporadically (CQ 19124)** – Previously, when a user double-clicked on a posting or in the posting section, the dialog sporadically would freeze and not allow the user to close or interact with it.

Resolution: Developers corrected this problem.

## Primary Care Button

- **NSR 20090621: Modify the CPRS Primary Care Button to Display the Associate Provider (CQ 18551)**

Resolution: Developers added the ability to display the associate provider on the Primary Care Team button.

## Printing

- **Printing Generic Orders with Several Lines of Text Truncates Lines That Exceed One Page in Length (Remedy 125784, 161946, CQ 15850, 15924)**

Resolution: Developers corrected the problem and CPRS will print the header and additional text correctly.

- **There Is No Indication in the Print Setup Menu Option (Remedy 69698, CQ 15926)** – If the user went to File | Print and tried to set a default printer, the default printer was not saved correctly.

Resolution: Developers corrected the problem, and the user can now set a default printer from the File | Print and Print Setup menu items. Also, developers added a feature to CPRS that enables CPRS to remember the last printer you selected. Because CPRS remembers the printer, a user can print to a specific printer during the same session without having to constantly reselect the printer.

- **Garbled Printout of Multi-Line Sigs on Clinical Reports (Remedy 144336, CQ 15943)** – Previously, Pharmacy Objects under “Clinical Reports” (Active Outpatient/All Outpatient) do not print the “Sig” column correctly. The output appeared to be scrambled.

Resolution: Developers corrected the problem and the output should display correctly.

- **GUI Print DS Chart Copy (Remedy 69315, CQ 19030)** – Previously, the site was able to print discharge summary Work Copies but not Chart Copies.

Resolution: Developers corrected this problem and sites should be able to print Chart Copies also.

## Problem List

- **Duplicate Problems: Need to Check for Duplicates Based on ICD9 Code (Remedy 192229, CQ 15928)** – Previously, CPRS did not check if problems were duplicates based on ICD-9 codes. Thus, two problems with the same ICD-9 code could be on the Problem List.

Resolution: Developers corrected this problem.

- **Unclear Error Message When Invalid Onset Dates Entered on Problem Tab (Remedy 69997, CQ 16123)** – Previously, when the user entered an invalidly formatted date for the Onset date on the Problems tab, CPRS displayed an error message, but some date formats on the error message were incorrect.

Resolution: Developers corrected the date formats in the error message.

- **Comments Not Showing under Remove Problem (Remedy 327569 - 6, CQ 19031)** – If a user tried to remove a problem, the problem comment was not displaying in the remove dialog.

Resolution: Developers corrected this problem and the comment now displays appropriately.

## Procedures

- **Can't Specify Chemo Drug Quantity on Procedure Tab (Remedy 123780, CQ 15837)** – Previously, users could not enter a high chemotherapy drug quantity on the Encounter Form's Procedure tab.

Resolution: Developers changed the limit on the Quantity field from 100 to 999 match the maximum value in PCE (Patient Care Encounter).

## Provider Selection

- **Access Violation in Provider Selection (Remedy 321169, CQ 18472)** – Users found that when using the keyboard's down arrow to select a provider, CPRS gave an access violation.

Resolution: Developers corrected this problem.

## Radiology or Imaging

- **Contract Source Entered in Imaging Order Dialog Does Not Match Source Displayed in the Order Details (CQ 19236)** – Developers found that CPRS was not using the correct identifier for the sources.

Resolution: Developers changed the CPRS remote procedure call (RPC) to use the correct identifier or internal entry number (IEN). The source should now display correctly.

## Reminders

- **Can Enter PCE Data for a Future Date through Reminder Dialogs (Remedy 70591, CQ 11703, 15941)** – Previously, although CPRS does not normally allow a user to enter encounter information for a future appointment, the user could enter future Patient Care Encounter (PCE) information for a future appointment.

Resolution: Developers corrected this problem, and users should no longer be able to enter PCE information for a future appointment through a reminder dialog, a TIU template with a reminder dialog, nor a TIU template with a reminder dialog attached to a note title.

- **Reminder Dialog Doesn't Remember the Size of the Resolution Window Anymore (Remedy 70423, CQ 15936)** – There was problem with the splitter bars not staying where the user set them. They would return to the default location—particularly with the Resolution window.

Resolution: Developers corrected the problem: The splitter bars will stay where the user sets them.

- **When Used in a Reminder Dialog, Template Field Default Values Do Not "Stick" (Remedy 119166, CQ 15960)** – Previously, if the user was working on a reminder dialog and there were template fields, the default values in the fields were not being placed into the note.

Resolution: Developers corrected this problem.

- **User Loses Work when a Reminder Dialog Is Cancelled...No Warning Is Displayed (Remedy 233376, CQ 16341, 18395)** – Previously, if a user was entering information in a reminder dialog and pressed the Cancel button, the dialog closed without warning the user that the information was going to be lost.

Resolution: Developers added a warning that the information already entered in the reminder dialog will be lost if the user cancels out of the dialog.



- **User Switches Patient while Reminder Dialog Is Open, Data from Previous Patient Used for Branching Logic (CQ 17665)** – Previously, if a user changed patients while a reminder dialog with branching logic was open, the information was not cleared and reevaluated for the new patient so that the appropriate prompts displayed. Branching logic means that if the patient has a specified characteristic, one set of prompts display, but if the patient does not have the characteristic, then different prompts display.

Resolution: Developers corrected the problem. If the user switches patients with the a reminder dialog with branching logic open, the dialog now clears the information and correctly evaluates the reminder for the selected patient.

- **Losing Reminder Buttons (Remedy 270817, CQ 17773)** – Previously, users could cover the Finish button by pulling the grey form over those buttons at the bottom of the form (Cancel, Visit Date, Finish, etc.).

Resolution: Developers corrected this problem. The user can no longer cover the buttons.

- **Reminder Window Displays Behind Main Window (Remedy 279998, 285859, 291824, CQ 17875)** – When working with the Mental Health .dll (dynamic link library), the dialog occasionally displayed behind the main CPRS window and the user could not access the dialog.

Resolution: Developers corrected this problem.

- **Available Reminder Dialog: Click on "+" to Expand Folder, Focus Goes to the Top, User Must Scroll Down (CQ 17940)** – Previously, in the Available Reminders dialog, if the user clicked on the "+" to expand the folder, the list returned back to the top, forcing the user to scroll back down to see the expanded list.

Resolution: Developers corrected the problem with the mouse click moving the form back to the top, but there is still a visual problem with using the keyboard click. However, the screen reader reads the correct data because the focus is at the correct location.

- **MH Test Not Clearing Out when Pressing Cancel Button in a Reminder Dialog Template (CQ 18395)** – Previously, if a user entered answers for a mental health test in a reminder dialog that had a TIU template, but the user then press the Cancel button, the information was not cleared. If a mental health test was then opened again, the entered information was still there.

Resolution: Developers corrected this problem. The data now clears correctly when the user presses the Cancel button.

- **Tilde in Reminder Dialog Objects Causes Subsequent Text to Be Truncated (Remedy 374851, CQ 19117)** – Previously, Reminder dialogs did not appropriately handle TIU objects that contained Pharmacy Orderable Items with the tilde character (~). The Reminder dialog would not show the tilde nor the text that followed the tilde.

Resolution: Developers changed CPRS so that Reminders dialog objects will now handle tildes and the text that follows appropriately.

## Remote Data

- **Only the Remote Data Button Turns Blue when Remote Data Is Available, Not the VistaWeb Button (Remedy 275969, CQ 17584)** – Previously, when the patient had remote data, the Remote Data button would change color as an indicator to the user that the remote data was available. The VistaWeb button did not change color even if there was remote data.

Resolution: Developers change CPRS so that the VistaWeb button also changes color when remote data is available. It also displays as being selected when the user selects VistaWeb to view remote data. It displays as depressed until a new patient is selected.

## Reports

- **Anatomic Path Reports Disappearing (Remedy 308138, 301412, CQ 18267, 18268)** – Previously, if a user were viewing information on the Labs and Reports tabs, CPRS could get confused and not clear variables as it should. The result was that information might not be displayed or information from the previous tab might be displayed.

Resolution: Developers corrected this problem. As the user switches between the Labs and Reports tabs, CPRS clears the appropriate variables and the correct information is displayed.

**Note:** This item is duplicated under the Labs heading because it affects both tabs.

- **Sometimes AP Alerts Do Not Display in VistA CPRS Scroll/Roll (CQ 18682)** – Previously, some anatomic pathology (AP) alerts were not displaying in the CPRS VistA roll and scroll character-based interface.

Resolution: Developers changed how CPRS looks for the appropriate lab data to make it more accurate.

## Set Up

- **Site Was Able to Assign 2 Items to the Same Sequence in a Dialog Group (Remedy 374911, CQ 19143)**

Resolution: Developers added a check so that two items cannot be assigned the same sequence number.

## Spell Check

- **Spell Checker Aborts if Note Starts with 2 or More Blank Lines (Remedy 70255, CQ 15244, 15822)**

Resolution: Developers corrected this problem.

- **Alt-Tab Can Hide Spell Check Window behind CPRS, Making It Appear That CPRS Has Locked Up (Remedy 70492, CQ 15823)** – Previously, when a user was spell checking a note and then used Alt-Tab to select another application, it could cause problems with CPRS. When the user returned to CPRS, the spell check window was behind CPRS and it appeared that CPRS was locked.

Resolution: Developers corrected the problem by changing CPRS to keep the spell check window in front of CPRS.

- **Spell Checking Options, such as Ignore Uppercase, Not Retained from Spell Check to Spell Check (Remedy 132780, CQ 15824)**

Resolution: Developers changed CPRS to store the spell checking options.

- **Access Violation after Using Spell Checker (Remedy 145863, CQ 15825)**

Resolution: Developers corrected this problem.

- **When Returning from Spell Checker, a List Out of Bound Error Occurs (Remedy 71028, CQ 15859, 11664)** – When the user has been using the spell checker and returned to CPRS, CPRS experiences a list out of bound error, followed by CPRS locking up. This list out of bounds error was caused by the spell checker taking more time than the broker timeout.

Resolution: Developers corrected this problem.

- **Spell Check: When 1st Line of Text Is \*\*\*\*\* Spell Check Will Not Work (Remedy 187352, CQ 16248)** – Previously, if a line in a progress note contained only special characters, such as asterisks, the spell checker did not work correctly.

Resolution: Developers corrected this problem.

- **Spell Check: Spell Check Window Hidden behind Current CPRS Window (Remedy 320202, CQ 18319)**

Resolution: Developers corrected this problem. In CPRS GUI v.28, the spell check was redesigned.

## Templates

- **Mouse Wheel Doesn't Work in Template Dialogs (Remedy 71293, CQ 15952)**

Resolution: Developers corrected this problem. The mouse wheel should now work in both template and reminder dialogs.

- **Template Editor: OK, Cancel and Apply Buttons Can Be Partially Blocked (Remedy 279399, CQ 18274, 18598)** – Previously, the user could move the different panels and panes on the Template Editor dialog and cover up some controls.

Resolution: Developers put controls in place so that the user cannot move the various items on the dialog to cover up the controls.

## Time Out

- **When CPRS Is Timing Out There Is No Immediate Way to Close CPRS (Remedy 69106, CQ 15961)** – Previously, when the CPRS Time Out dialog displayed and began counting down the time to close CPRS, there was no way to immediately close CPRS from the dialog. Also, if some other application was open and active, the CPRS Time Out dialog would not display on top of the other applications.

Resolution: Developers corrected both problems. Developers added a Close CPRS button to the CPRS Timeout dialog, and the dialog will now display on top of other applications if they are active.

- **If CPRS Timeout Is Set to 0, It Counts Negative Numbers (CQ 17558)**

Resolution: Developers corrected these problems. If set to zero, CPRS closes after the appropriate time without any user interaction.

- **CPRS Time Out Warning Message Pulls the User into Session Being Timed Out (Remedy 276342, CQ 17595)** – This problem occurred in CPRS GUI v.27 when the user had several CPRS sessions open at one time and the session that was not currently active timed out. For example, if the provider was placing orders in the record of Patient C when the timeout occurred on Patient A, Patient A's record became active and the provider did not notice—meaning the provider could enter orders in the incorrect chart.

Resolution: Developers changed CPRS so that when one session of multiple sessions that are opened is about to close, CPRS pulls the user into that session so that the dialog can warn the user by identifying which session is about to close, count down, if a countdown is set up, and close the session. The dialog now displays for the user which patient's chart (session) is about to close.

## **TIU (Text Integration Utilities)**

- **When Changing Note Title to a Title without a Template or Boilerplate (Remedy 218011, CQ 15855)** – Previously, when the user changed the note title to a title without a template or boilerplate, CPRS displayed a dialog to ask the user whether the text that the user had put in the first note should be placed in the new title's note. The dialog presented three items:
  - Ignore the boilerplate text (text of note will not change).
  - Append the boilerplate text to the text of the note.
  - Replace the text in the note with the boilerplate text.

The options did not make clear what the user should do to retain the text. The request was to change the default response to better avoid losing text.

Resolution: Developers simplified this dialog. Now, it asks if the user wants to clear the existing note text and has a Yes and No button with the default being No. If the user selects a new note title and presses <Enter> in the dialog, CPRS retains the text in the new title's note.

- **When Writing a New Note with a Linked Template Dialog Boilerplate an Access Violation Occurs (Remedy 69674, CQ 15860)** – When a user was writing a new note that had a linked template dialog boilerplate and CPRS timed out, an access violation occurred, and all references to the note were lost. There was no record of a note even having been started on patient.

Resolution: There will no longer be an access violation when a template dialog is open and CPRS times out. Any open template dialog will be canceled (losing any entries made in the dialog), but all existing text in the note will be retained.

**Note:** However, if a user is entering a new note but the note contains no text, and a timeout occurs, the note will be deleted because it is empty. This is normal CPRS behavior for empty notes on time out.

- **Assigning a Default Cosigner when There Are Large User IENs Causes Range Check Errors (Remedy 70088, CQ 15901)** – Previously, when the user was assigning a default cosigner and the system had large internal entry numbers (IENs), a number CPRS user to identify users, range check errors could occur.

Resolution: Developers corrected the problem.

- **Unable to Edit Notes after Pasting in Large Amounts of Text (Remedy 71058, CQ 16226)** – Previously, if a user pasted a large amount of text into a note, the user was unable to edit the note. The only thing the user could do was to backspace out text and then to replace it with only the same amount of text that they took out.

Resolution: Developers changed CPRS to allow editing text after pasting in large amounts of text.

- **Undo Not Working (Remedy 70341, CQ 18262)** – Users noted that after pasting text into a note, the Undo feature was not working.

Resolution: Developers corrected this problem. After pasting text into a note, the user can remove the pasted text immediately after pasting by selecting Edit | Undo or using the keyboard combination CTRL + Z. If the user types text, Undo will remove the text. The Undo feature only works once and then it switches to be a Redo (under Edit | Redo). Developers also added the CTRL+Y keyboard combination for Redo.

- **Text Wraps Using Templates (Remedy 304116, CQ 18263)** – Previously, the text in templates was not wrapping correctly especially when the text went down far enough to create the need for a scroll bar.

Resolution: Developers changed CPRS to adjust for the text when a scroll bar displayed. This should correct the wrapping problem.

- **TIU Word Processing Template Field TRUNCATION (Remedy 275552, CQ 18266)**

Resolution: Developers corrected this problem. The field no longer truncates as did.

- **Search for Text in Notes Tab (Remedy 242455, CQ 18269)** – When the user was searching through notes, the feature worked fine. But, after doing a search, when attempting to do something else on the notes tab, the search would be done again—causing an annoyance to the user.

Resolution: Developers corrected this problem so that the search terminates correctly.

- **Display on Pop Up Dialog for “Search for text (within current View)” Wrong; Display Says: “List Signed Notes by Author” (Remedy 278651, CQ 18270)** – Previously, when the user selected the menu item “Search for text (within Current View)”, the heading on the dialog that displayed incorrectly read, “List Signed Notes by Author”.

Resolution: Developers corrected the dialog label, which now correctly reads, “Search for text (within current View)”.

- **Identifying Co-Signer Requires Double Click Instead of Single and Does Not Refresh (CQ 19451)** – Previously, there was a problem where users had to double-click to move a name to the list of additional cosigners. Then, there was also a problem in that the list did not appropriately refresh.

Resolution: Developers changed CPRS to move a name with a single click and the list now refreshes correctly.

## Tools Menu

- **Add Submenus to the Tools Menu (Remedy 162367, CQ 15848, 15962)**

Resolution: Developers added the ability to add submenus to the Tools menu and expanded the number of possible items to 99, including dividing lines.

## VBECS (VistA Blood Establishment Computer System)

- **VBECS: Expired Orders That Are Not Associated with a Specimen (CQ 16257)** – Previously, CPRS was not accepting a change of status for expired orders.

Resolution: CPRS will now accept the update to the expired order status.

- **VBECS: Reason for Request Does Not Auto-Fill on Order Dialog with Surgery QO (CQ 18037)** – Previously, sites reported that the Reason for Request field does not auto fill on the order dialog with Surgery entry from quick orders (QO).

Resolution: Developers changed CPRS so that when a quick order defines the urgency of PRE-OP and a surgery, CPRS puts the surgery in the Reason for Request field just as if the user selected it from the dialog.

- **VBECS: Surgical QO MSBOS Alert Does Not Occur when #Units Are Exceeded (CQ 18039, 18040, 18041)** – Previously, when a user placed a quick order for blood components for a surgery and the quantity exceeded the Maximum Surgical Blood Order Schedule (MSBOS) configuration in VBECS, the MSBOS alert did not occur. The alert also did not occur when a Type and Screen quick order was placed and then the user added blood components to the order.

Resolution: Developers corrected a problem where the logic to check the MSBOS was not occurring. The check is now occurring as it should.

- **VBECS: Some Components Require T&S even though VBECS Has Been Configured Not to Require T&S (CQ 18443)** – Previously, CPRS was incorrectly requiring some blood components, such as fresh frozen plasma or platelets, to have a T & S (type and screen) even though the configuration did not call for it. The check

in CPRS for whether a blood component required a type and screen was not working correctly.

Resolution: Developers corrected this problem and the check for a type and screen should function correctly.

- **VBECS: Stat Urgency Changed to Routine when Selecting T&S (CQ 18747)** – In the Blood Bank order dialog, sites reported that when selecting STAT for component when ordering the T&S, urgency changes to Routine. The problem was that CPRS was recalculating the urgency every time the user selected a new component or test.

Resolution: Developers changed CPRS to retain the urgency the user originally entered.

- **VBECS: QO Heading Displays "9^ROUTINE" (CQ 18784)** – Previously, when the user selected a quick order, the dialog heading displayed, "9^ROUTINE".

Resolution: CPRS developers corrected this problem. With quick orders, the dialog's heading should read, "Blood Components and Diagnostic Test Order Form".

- **VBECS: QO with Collection Date T+14 Displays "Today" in Dialog (CQ 18791)** – Previously, sites could create quick orders with the collection date as t+14 (14 days or two weeks in the future), but the Blood Components and Diagnostic Tests Order Form dialog displays "today" as the collection date. The order detail displays the correct collection date as t+14.

Resolution: Developers found problems with a predefined Collection Time not being displayed correctly for Lab Collection types of Ward Collect and Send Patient. Developers corrected this problem and fixed a problem with Collection Type/Time issues when editing quick orders. The correct predefined date now displays.

- **VBECS: QO in CPRS Defaults to CT Ward Collect for All Locations (Remedy 358702, CQ 18794)** – Previously, sites discovered problems with how the Collection Type was coming through with quick orders.

Resolution: Developers corrected several problems with how the Collection Type was being used. It now functions correctly.

- **VBECS: Ordering the Diagnostic Test after the Urgency Changes Urgency to Routine (CQ 18841)** – When a user ordered a component and selected an urgency and then selected a type and screen, the urgency was incorrectly changed to Routine.

Resolution: Developers corrected this problem and the selected urgency will be retained.



- **VBECS: Reason for Request and Comments Not Sent to VBECS Consistently (Remedy 366886, CQ 18873)** – Previously, CPRS was inconsistent sending a reason for request and comments to VBECS for diagnostic tests.

Resolution: Developers changed CPRS to selectively add/remove the required flag (\*) from fields based on what the user selected. The Reason for Request is not required for diagnostic tests, so this change should help clarify to the user when a particular field is required.

- **VBECS: Write a BB Order then Go to Change Order Containing Type and Screen, Another T&S Is Requested (CQ 18888)** – Previously, if a user tried to change an unreleased Blood Bank (VBECS) order that already included a type and screen, CPRS incorrectly displayed the message that a type and screen was required.

Resolution: Developers changed CPRS to look at the content of the unreleased order and if a type and screen as included in the unreleased order, CPRS does not prompt for another, unnecessary type and screen.

- **VBECS: Sending CPRS Active T&S with No Component from MSBOS Setting in VBECS (CQ 19070)** – Previously, there was a problem with communication between CPRS and VBECS. When the user selected blood components and selected a surgery that did not require blood components according to the Maximum Surgical Blood Order Schedule (MSBOS) as the reason for request, CPRS was then informing the user that a Type and Screen was needed.

Resolution: Developers corrected this behavior. If the user selects a surgery that does not require blood components according to the MSBOS, CPRS now displays a dialog warning the user that no blood is required. CPRS also displays a label on the Blood Components and Diagnostic Test Order Form dialog.

- **VBECS Future Orders: None of the RBC Orders Crossed to VBECS (Remedy 382825, 383708, 408643, 416671, CQ 19139, 19259)** – Previously, some VBECS future orders were being cancelled because an incorrect lab specimen (Type and Screen) was associated with the order. The problem occurred because future orders were associated with an existing specimen that would expire in a few days instead of being associated with a Type and Screen that the user entered for the future blood product. After the existing specimen expired, the future order was cancelled because the associated Type and Screen's specimen had expired.

Resolution: Developers changed CPRS to compare the date wanted and the specimen expiration date to ensure that the order will be tied to the correct specimen.

- **VBECS: Keeping Date/Time Wanted, Collection Type, and Collection Date/Time Active (CQ 19168)** – During testing, sites reported that clinicians found it confusing that they had to select an item in “shopping cart” or Selected Components and Tests area to modify the item's characteristics using the display above it confusing. The sites suggested that keeping the Date/Time Wanted, Collection Type, and Collection Date/Time active would allow them to directly select the item above.

Resolution: CPRS developers took the advice of the sites and changed the Blood Components and Diagnostic Test Order Form dialog so that those items that apply to all components or diagnostic tests continue to display as the user edits the order. Also, the last item that a user edited in an area will display when the user puts the focus in that area either by tabbing into or clicking in that area. To edit a different item, the user must still select the item under the Selected Components and Tests area.

- **VBECS: QO for Immediate Collect No Ellipsis (Date/Time) Button Available to Select Date/Time Collection (Remedy 389479, CQ 19202)** – Previously, when clinicians were placing orders, they wanted to set the time a few minutes in the future, but they could not see the ellipsis button.

Resolution: Developers found that the ellipsis button was inadvertently covered on the dialog and not functioning correctly. Developers corrected the problem and the ellipsis button is now functioning correctly.

- **Blood Bank Reason for Request Requires Rolling the Mouse over Reasons Several Times (CQ 19224)** – Previously, the only way to see a long reason for request on the Blood Components and Diagnostic Test Order Form dialog was to move the mouse over the reason for request several times.

Resolution: Developers altered the dialog slightly to make the Reason for Request field longer so that the reason can be seen without using a mouse over hint. The user should now be able to see the reason for request.

- **VBECS: Font Size Equal to or Greater Than 10 in the VBECS Order Dialog Causes Display Problem with Diagnostic Test Panel (CQ 19268)** – The Diagnostic Test Panel at the top of the Blood Bank Order Dialog would only partially show when changing the font size to something above 8.

Resolution: Developers corrected the problem.

- **VBECS QO with PLT, FFP, or CRYO that Do Not Require a T&S when Place Will Require a T&S (CQ 19306)** – Previously, when a user created a quick order for platelets, plasma, or cryoprecipitate that did not require a Type and Screen, CPRS did show the warning that the Type and Screen was required when the order was placed.

Resolution: Developers changed CPRS to not require the test when it was not necessary.

- **VBECS Duplicate T&S Order Warning Message Does Not Work with a Manual T&S Order (CQ 19312)** – Previously, when a user was placing a quick order (QO) that created a duplicate Type and Screen order, CPRS gave the warning, but if the user placed the order manually from the Blood Component and Diagnostic Test Order Form dialog, the user did not get the warning message.

Resolution: Developers corrected this problem and the warning should display at the correct times.

- **VBECS Surgery Entry in All Uppercase Does Not Trigger Warning (CQ 19325)** – Previously, if a user created a quick order with a reason for request for a specific surgery that used different capitalization than the same surgery entered in the VBECS, such as NEPHRECTOMY instead of Nephrectomy, the Maximum Surgical Blood Order Schedule (MSBOS) warning did not display as it should.

Resolution: CPRS developers made sure that CPRS is now checking for the surgery regardless of capitalization so that the MSBOS warning will display correctly.

- **VBECS Generic BB Opens with Scroll Bar at the Bottom of Screen (CQ 19342)** – A test site reported that a user opened the Blood Component and Diagnostic Test Order Form dialog and saw a scroll bar across the bottom of the dialog. This occurred when the user had the Windows Classic appearance setting instead of the Windows XP setting.

Resolution: Developers made a change to support the Windows Classic setting also.

## 508 Changes

- **508: Problems Tab - View Menu - Return to Default View – JAWS (CQ 4700)** – Previously, if a user returned to the default view by selecting View | Return to Default View, JAWS did not speak anything to tell the user that CPRS had returned to the default view.

Resolution: Developers corrected this problem. When the user selects View | Return to Default View and JAWS is running, JAWS will say, “Returning to default view”.

- **508: Problems Tab – JAWS (CQ 4709)** – Previously, after the user went to the Problems tab in CPRS, the first time the user tabbed JAWS did not speak anything.

Resolution: Developers changed CPRS and the extra tab no longer exists.

- **508: No Default Rad Btn on Patient Selection Screen Doesn't Read in JAWS (CQ 4716)** – Previously, the No Default radio button in the Patient List group box on the Patient Selection screen did not read in JAWS when it was unavailable (greyed out). The user could get to all the other radio buttons (2 of 7 through 7 of 7: Providers, Team/Personal, Specialties, Clinics, Wards, and All), but they can't get to 1 of 7 (No Default) and didn't know it was greyed out.

Resolution: Developers changed CPRS so that JAWS now reads the No Default radio button when it is disabled. When a user tabs into the Patient List panel and a default patient list is not defined (the No Default radio button is greyed out), JAWS now says the following: No Default radio button unavailable 1 of 7. To move to the other patient list categories, press Tab. Pressing tab will direct focus to the 'All' patient list category. Then, JAWS reads the instructions that tell the user to press the Up Arrow or Down Arrow to move between patient selection categories.

- **508: Problem List Tab: Would Like to Press <Enter> Key Here to Invoke “New Problem” (CQ 11529)** – CPRS received a request from the field to make the New Problem button the default selection after a user selected the Problems tab.

Resolution: Developers made the change. When the user selects the Problems tab, the user can select the New Problem button by pressing either the <Space Bar> or the <Enter> key. If the user refreshes the patient data, CPRS keeps the focus wherever it was. When changing patients, CPRS places the focus in a default position, *not* on the New Problem button.

- **508: Combo Box Template Field Selections Can No Longer Be Selected Using Keyboard Past First Character (Remedy 70272, CQ 11708, 15766, 15767)** – Previously, users could not type more than one character when attempting to select a template field. This problem meant that the user had to scroll through the list to find the appropriate selection, which could be very time-consuming.

Resolution: Developers corrected this problem, and the user can now type in more letters to quickly locate the appropriate selection.

- **508: Difficulty Figuring Out How to Navigate to Enter Allergy on the Cover Sheet (CQ 15508)** – Previously, it was very difficult for visually impaired users to know how to enter an allergy from the Cover Sheet.

Resolution: Developers added instructions to the Allergies/Adverse Reaction list box when CPRS detects that JAWS is running. The instructions tell the user how enter an allergy.

- **508: Allergy—Focus Never Goes to the Observed/Historical Radio Buttons when Tabbing through the Allergy Entry Dialog (CQ 15509)** – Previously, if the user was using the keyboard to tab through the controls in the Enter Allergy or Adverse Reaction dialog, tabbing skipped the Observed and Historical radio buttons.

Resolution: Developers added the radio buttons to the tab order. The user can now tab to this control.

- **508: Allergy—SR Does Not Read or Focus on Un-editable Fields in Allergy Entry Dialog (CQ 15510, 18654)** – Previously, the screen reader did not read two fields on the Enter Allergy or Adverse Reaction dialog: the Originator and Origination Date. It did not read these fields because the user cannot edit these fields.

Resolution: Developers made a change so that the screen reader will now read these fields.

- **508: Allergy—Blank Lines after the Top Ten S/S Are Confusing Using JAWS (CQ 15511)** – Previously, when a visually impaired user in the Enter Allergy or Adverse Reaction dialog moved down through the Signs and Symptoms (S/S) list, a blank line after the first ten items confused the user because there was no indication of what was happening.

Resolution: Developers changed the Signs and Symptoms list so that when JAWS is working, CPRS puts a line of dashes with an explanation instead of a blank line. This should help indicate to the visually impaired user that there are more items below.

- **508: Allergy—Comment Does Not Read when Tabbing through the Allergy Entry Dialog (CQ 15512)**

Resolution: Developers changed the Enter Allergy or Adverse Reaction dialog so that the screen reader begins speaking the comment as soon as the user tabs into the Comments field.

- **508: Allergy—Allergy Selected in the Lookup Dialog Reads as Not Selected in the Detail Dialog (CQ 15513)** – Previously, after the user selected the reactant that caused an allergy or adverse reaction and then went to the Enter Allergy or Adverse Reaction dialog, the reactant was in a field that the user could not edit. Because the user could not edit the reactant, JAWS did not read it.

Resolution: Developers changed CPRS so that JAWS now reads the field and the reactant, and then states that it is read-only.

- **508: Allergy—The Word “Symptoms” Is Read as “Ymptoms” (CQ 15515)**

Resolution: Developers corrected this. It now reads as “symptoms”.

- **508: Allergy—On the Cover Sheet, Focus Returns to Active Problem List after an Allergy Entry (CQ 15516)** – When a user enters an allergy or views a detailed display of the allergy from the CPRS Cover Sheet and then closes the dialog, the focus goes to the Active Problems pane instead of the Allergies/Adverse Reactions pane.

Resolution: Because users can enter allergies from several locations in CPRS, focus cannot be returned from that dialog to the Allergies/Adverse Reactions section of the Cover Sheet. However, developers did change CPRS so that from the allergy detailed display, the focus will return to the Allergies/Adverse Reactions section of the Cover Sheet.

- **508: Allergy—In Reactant Lookup Match List when No Matches Were Found , “Grayed X Explanation” Is Read (CQ 15517)** – Previously, in the Reactant Lookup Match list after a search, the screen reader read, “Grayed X Explanation”. The reason for this was that the search did not produce results in some categories, and CPRS displayed an X in front of the category. What the screen reader read was not clear.

Resolution: Developers changed the screen reader label. It now says, “No matches.”

- **508: Allergy—S/S Selection Keystroke Needs Better Instruction (CQ 15518)** – A user suggested that the instructions when the user is in the Signs and Symptoms list could be improved. It previously said, “Press Enter to set the value”.

Resolution: Developers changed the label and it now speaks, ““Press Enter to select the sign/symptom””.

- **508: Allergy—If the User Hits Escape during Entry of the Allergy, the Allergy Is Abruptly Ended (CQ 15519)** – If the user was entering an allergy and pressed <ESC>, then the entry was terminated without warning.

Resolution: Developers added a dialog that will display and ask the user to confirm that the user wants to cancel the allergy entry.

- **508: Allergy—The Severity Level Button Is Only Identified as “? Button” (CQ 15520)**

Resolution: Developers labeled the button as “Security level descriptions button”.

- **508: Problems Tab (CQ 15531)** – Upon reviewing the Problems tab with a visually impaired user, several problems regarding navigation and access by a visually challenged user were identified:

- Although not visible to a sighted user, there was a control that did not speak its location or purpose when JAWS was running—making it impossible for the JAWS user to know where focus was in the dialog or what to do next.

Resolution: Developers removed the hidden control and set CPRS to not tab to that location.

- If the user selected or highlighted a problem, it was set as a description and was not cleared. Because the description was not properly cleared, the description could stay when the user changed to another patient.

Resolution: Developers made sure CPRS properly clears the description so it will not persist between patients.

- When a user added or edited a problem and tabbed past the Date of Onset button, the focus shifted to a location hidden underneath the dialog, where JAWS read the last selected/added problem or the first problem in the list (if not selected/just added).

Resolution: Developers corrected this problem by not allowing the other control to receive focus and subsequently be read by JAWS.

- The tab order when on the Add/Edit dialog was confusing, and the user could Shift + Tab off the form, but not back onto the form. The user could Tab back onto the form, but not using Shift + Tab.  
Resolution: Developers corrected the tab order and the Shift + Tab issue.

In addition, while working on these problems, developers identified and corrected two other problems on the Problems tab.

- When a user edited a selected problem (Action menu | Change), after leaving the menu, JAWS read the last selected or first problem in the list when it was hidden and underneath the Edit Problem form. This might or might not have been the problem being edited.  
Resolution: Developers corrected this problem by resetting the focus so that JAWS no longer reads the underlying problem.
- When the user moved to the Cancel button, JAWS was reading the button twice.  
Resolution: Developers corrected this and JAWS will only speak Cancel once.

- **Patient Selection Form Does Not Move or Resize Using Keyboard Commands (CQ 15963)** – Previously, the user could not move or resize the Patient Selection form using the keyboard only (such as Alt + m and then the arrow keys to move the dialog).

Resolution: CPRS developers corrected this problem, and user can now use the keyboard only to move and resize the form.

- **508: Order Sets: Order Sets Are Difficult to Use (part 2)--Make the Allergies New Allergies Dialog Non-Modal (CQ 17765)** – Previously, because some dialogs were modal—meaning the user could not move from one dialog to another, it was difficult for visually impaired users to know what it happening. With order sets, the visually impaired users did not know what the order set contained or that they could stop the order set using a button on the dialog. This inability to move between dialogs in the same application (modal dialogs require a response before the user can go to another dialog) also influenced how visually impaired users could use allergies dialogs.

Resolution: Developers changed the dialogs in Order Sets to be non-modal. So, when JAWS is running on the workstation and the user chooses an order set, CPRS displays a new dialog that informs the user about the order sets: what orders are included, an OK button to begin the order set, and instructions on how to move to the Order Set dialog and stop the order set in progress using keyboard commands.

- **508: Order Sets: Order Sets Are Difficult to Use (part 3) -- Have the Screen Reader Read Auto-Accept QO (CQ 17766)** – When using the menus created with order sets, individuals using the JAWS screen reader were only read the label on an item and then the screen reader began reading the first dialog in the order set.

Resolution: Developers added some text to CPRS so that when JAWS is reading an order set, it will now say, “Auto-Accept Quick Order *name of the quick order* placed.” Then, it will read the rest of items in the order set.

- **508: Order Sets: Order Sets Are Difficult to Use (part 4) Have the Order Set Dialog Pop Up a Message When Running SR (CQ 17767)**

Resolution: As directed, developers made the Order Set dialog bring up a message when an order set is running a screen reader (SR).

- **JAWS Only Reads Visible Text in Interaction Selection Dropdown on Monograph Dialog (CQ 19017)**

Resolution: Developers changed CPRS so that JAWS will read the entire item.

- **JAWS Reads Panel1 before Label on PRF Dialog (CQ 19163)**

Resolution: Developers corrected this problem and JAWS now reads appropriately.

- **JAWS Reads Category I as “Category Eye” (CQ 19164)**

Resolution: Developers corrected the problem and it now read “Category One”.

- **508: Adjust Tab Order on PRF Dialog (CQ 19165)** – For a keyboard only user, the tab order for the Patient Record Flag dialog changed from CPRS v.27.n to v.28.

Resolution: CPRS developers changed the tab order for keyboard users back to what it was in CPRS v.27.n: main text block, notes block, OK button, Category I, Category II.

- **JAWS Does Not Read Label for Note List Box on PRF Dialog (CQ 19166)**

Resolution: Developers changed CPRS to read the label on the Note list box on the Patient Record Flag (PRF) dialog.

- **508: Patient Selection Form 508 Issues (CQ 19336, 19412)** – Previously, on the Patient Selection screen, the screen reader did not detect the demographic information for the patient that displays when a patient name is highlighted. Also, the radio buttons under the Patient List group did not read that group label.

Resolution: Developers changed CPRS so that JAWS will now detect the demographic information, such as the social security number, date of birth, gender, service connection status, and location.

- **Enter Allergy or Adverse Reaction Form - Causative Agent Edit Is Partially Labeled (CQ 19337)**

Resolution: Developers corrected this, providing more information.



- **Enter Allergy or Adverse Reaction Form - Nature of Reaction Combo Box Is Partially Labeled (CQ 19338)**

Resolution: Developers corrected this problem and added to the label.

- **Enter Allergy or Adverse Reaction Form: Missing Edit Field Label (CQ 19339)**  
– Previously, when a user went in to the Allergy or Adverse Reaction form, the Signs/Symptoms field did not speak the label correctly.

Resolution: Developers corrected this problem, and the field should now read correctly.

- **Enter Allergy or Adverse Reaction Form: Reaction Date/Time Edit Field Not Labeled (CQ 19341)**

Resolution: Developers correctly labeled the Reaction Date/Time field.

- **Enter Allergy or Adverse Reaction Form: Issues with Calendar Utility (CQ 19344)** – Previously, the CPRS calendar control through which a user would enter a date was not labeled correctly, which made it difficult to enter a date.

Resolution: Developers changed which control was used to enter a date. JAWS can now read the labels and dates entered with the date box control.

- **508: Problem List Lexicon Search: The Number of Search Results Displayed on Screen Not Available to Screen Reader (CQ 19358)** – After a Lexicon search was performed, there was text at the bottom right of this form that gave a breakdown of the search results. This text was not available to the screen reader.

Resolution: Developers placed the label displaying the search results in the tab order when the screen reader is running.

- **508: Add Problem Form: Tab Order Problem (CQ 19359)** – Previously, the tab order for this form did not seem to make sense. The OK and Cancel buttons came in the tab order before the other fields to enter a problem.

Resolution: Developers changed the tab order to something more logical.

- **Problems Form: Tab Selects List Box Not Visible On Form (CQ 19361)** – If a user tabbed through the form and tabbed past the Date of Onset field but then shift + tabbed back, the focus would go to an invisible combobox.

Resolution: Developers changed the tab order and the focus should no longer go into the combobox.

- 508: Orders / Write Delayed Orders Button / Release Orders Form - Undetectable Text (CQ 19385)** – Previously, when the user selected the Write Delayed Order button on the Orders tab, CPRS displayed the Release Order dialog, but the text at the top of the dialog was not available for the screen reader.

Resolution: Developers corrected this problem. When the Release Order dialog displays, the text at the top of the dialog can now be read when a screen reader is running.
- 508: Add New Orders Form - User Cannot Detect the Number to the Left of the Orders (CQ 19386)**

Resolution: Developers corrected this problem and the screen reader will now read the number/prefix (Mnemonic) of the order.
- 508: Order an Imaging Procedure Form - Reason for Study Label Issue (CQ 19392)** – The Reason for Study field label lacked explanation of what the user should do.

Resolution: Developers added to the label so it now reads, “Reason for Study REQUIRED text 64 characters maximum length”.
- 508: Order an Imaging Procedure Form: Submit To Field Not in Tab Order (CQ 19393)** – Previously, it appeared that the Submit To field was not in the tab order. However, this field was a conditional field based on what imaging procedure the user selected. It was not in the tab order if it was not active.

Resolution: Although this was functioning as it was designed, it made it difficult for a visually challenged user to know that it was there unless it was active. Developers therefore changed CPRS to have the screen reader read that it was there even if it was not active.
- 508: Order an Imaging Procedure Form: Text Area Not in Tab Order (CQ 19394)** – Previously, the text area that shows the order text was not in the tab order for keyboard users so they could not get to that information.

Resolution: Developers placed the area in the text order.
- 508: Infusion Order Form Field Label Issues (CQ19397)** – Previously, several fields on this dialog were mislabeled: the Type (IV Type Help) combo box, the Schedule (Day of Week) combo box, and the Infusion Rate (ml/hr) combo box.

Resolution: Developers corrected all the labels.
- 508: Text Area Not in Tab Order on Various Forms (CQ 19400)**

Resolution: Developers put the area in the tab order on several forms.

- **508: Order a Procedure: Combo Box Is Read-Only/User Focus Problem (19401)**  
 Resolution: Developers changed CPRS so that the “Service to perform this procedure” field is now in the tab order and can be read by JAWS.
- **508: Non-VA Medications Form: Unlabeled Field (CQ 19402)** – Previously, the first field on the Non-VA Medications form was not labeled.  
 Resolution: Developers added a label to the Medication field and the Order SIG field. Also, the developers added a tab stop for the Quick Order field when the screen reader is active.
- **508: Patient Care Order Form: Combo Box Unlabeled (CQ 19403)**  
 Resolution: Developers labeled the combo box appropriately.
- **508: Activity Orders: User Focus Problem (CQ 19404)** – Previously, if a user was working in this dialog, the screen reader did not read the order text in the box.  
 Resolution: Developers changed how CPRS deals with this order dialog based on whether a screen reader is running. When CPRS detects a screen reader, developers added the text order area to be tab order, labeled the new field, and made it read only so that the screen reader can read it and then tab out of the field.
- **508: Non-Formulary Drug Request: Edit Fields Label Issue (CQ 19405)**  
 Resolution: Developers labeled the Order Sig and Admin Schedule fields in the Medications dialog.
- **508: Non-Formulary Drug Renewal: Edit Fields Unlabeled (CQ 19406)** – Previously, the screen reader did not read the Renew Orders or the Change Refills for Outpatient Medication dialogs correctly.  
 Resolution: Developers changed how JAWS interacts with these dialogs. On the Renew Orders dialog, the tab order was changed and now goes from Change, OK, and Cancel. On the Change Refills for Outpatient Medication dialog, developers made changes so that the text field at the top of the dialog first receives focus so that the screen reader can read the order text, then tabs to the Refills field, and then tabs to the Pick Up field before returning to the text area that holds the order text.
- **508: Provider & Location for Current Activities/New Visit Tab - Date Field Label Missing (CQ 19433)**  
 Resolution: Developers changed the label to display correctly.

- **GUI Options Dialog Box is Not Resizable (CQ 19480)** – Previously, if a user changed the font size for CPRS, the Options dialog (Tools | Options) did not resize appropriately and text or buttons could be cut off.

Resolution: Developers changed the dialog that it will resize when the font size is changed.
- **JAWS Does Not Read Text Box Correctly on Text Order Dialog (CQ 19519)** – Previously, in the Text Order dialog, JAWS read the wrong label for the Sig field if there was nothing in the Stop Date field. It read, “Stop Date” when the user tabbed to the Sig field.

Resolution: Developers corrected this problem. JAWS will correctly read the labels and content for the fields.
- **508: IV Order—Solutions and Additives Tabs Are Not in the Tab Order (CQ 19531)** – Previously, on the Infusion Order dialog, the Solutions and Additives tabs were not in the tab order and therefore could not be read by JAWS.

Resolution: Developers placed the Solutions and Additives tabs in the tab order.
- **508: IV Order—Asterisks Not Read (CQ 19532)** – Previously, JAWS did not read the asterisks on the Infusion Order dialog that marked the required fields.

Resolution: Developers changed CPRS and the asterisks will now be read.
- **508: IV Order Form—Unable to access label click functions (CQ 19533)** – Previously, users could not reach the links next to the labels for Route, Type, and Schedule that bring up the full list of routes, the definitions for continuous and intermittent, and the Day of Week schedule builder.

Resolution: Developers changed CPRS and the user should now receive instructions when the screen reader first tabs to those fields to reach the links by using the keyboard combination ctrl + alt+ L.
- **508: Patient Selection Form— Elements of form are not in tab order (CQ 19686)** – Previously, the labels of some controls were not read, especially when the items were unavailable.

Resolution: Developers labeled the Process, Remove, Forward, and Show Comments buttons and the labels are in the tab order (as it is not possible to focus a disabled control). The labels for each button state that the buttons are disabled. The labels only display when the screen reader is running and the buttons are disabled.