

REMINDER UPDATE 2 0 304 VA-MISC UPDATE 20 CHANGES

NOTE: All reminder dialog changes are included in reminder dialog group:
VA-GP MISC UPDATE 20

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Note: To confirm updates made on any 'national' dialog element or group listed below, choose the INQ (Inquiry/Print) option in the Reminder Dialog Management Menu.

1. Reminder GROUP: **VA-WH TD PREGNANCY ENDED REASON MATERNAL MORTALITY**

Change Made: The element for 'Infant Loss' was removed.

This group resides in the VA-WH UPDATE PREGNANCY STATUS reminder dialog.

BEFORE:

Group: VA-WH TD PREGNANCY ENDED REASON MATERNAL MORTALITY

Text: Maternal mortality

Element: VA-WH TD PREGNANCY ENDED INFANT MORTALITY

Text: Infant loss

Reminder Dialog Template: VA-MATERNITY CARE COORDINATION

Pregnancy End Date: * Feb 10, 2022 ...

Reason Pregnancy Ended:

- Vaginal delivery
- C-section
- Vaginal delivery and C-section
- Stillbirth (fetal demise 20 weeks or greater)
- Miscarriage (early pregnancy loss less than 20 weeks)
- Termination
- Ectopic
- Maternal mortality
- Infant loss

AFTER:

Group: VA-WH TD PREGNANCY ENDED REASON MATERNAL MORTALITY

Text: Maternal mortality

Reminder Dialog Template: VA-MATERNITY CARE COORDINATION

Pregnancy End Date: * Feb 10, 2022 ...

Reason Pregnancy Ended:

- Vaginal delivery
- C-section
- Vaginal delivery and C-section
- Stillbirth (fetal demise 20 weeks or greater)
- Miscarriage (early pregnancy loss less than 20 weeks)
- Termination
- Ectopic
- Maternal mortality

2. Reminder GROUP: VA-GP MCC COVERAGE OF NEWBORN CARE MAIN

Change Made: Dialog text in four sub-elements has changed.

This group resides in the VA-MATERNITY CARE COORDINATION reminder dialog.

BEFORE:

Group: VA-GP MCC COVERAGE OF NEWBORN CARE MAIN

Text: VA Coverage of Maternity and Newborn Care
[BOX, NO SUPPRESS, HIDE, ONE OR MORE]

Element: VA-MCC COVERAGE OF NEWBORN CARE

Text: VA Newborn Care Coverage and obtaining Non-VA Newborn Health Insurance Coverage.

Element: VA-MCC COVERAGE OF NEWBORN CARE PROVIDER

Text: VA Reimbursement for Pregnancy-Related Classes.

Element: VA-MCC COVERAGE OF NEWBORN CARE DATE

Text: VA Coverage of Nursing Bras, Breast Pumps and Supplies.

Element: VA-MCC COVERAGE OF EMERGENCY CARE

Text: VA Coverage of Emergency Care, including hospitalizations.
Process for after-hours authorization.

Element: VA-MCC COVERAGE OF MEDICATIONS

Text: VA Coverage of Medications. They are only to be filled at VA pharmacies.

Element: VA-MCC COVERAGE OF NEWBORN CARE BENEFITS

Text: Patient Response to Receiving a Bill from an Approved Community Care Provider.

Element: VA-MCC COVERAGE OF NEWBORN CARE COMMENTS

Text: Additional Comments: {FLD:TEXT NO LIMIT}

Reminder Dialog Template: VA-MATERNITY CARE COORDINATION

VA Coverage of Maternity and Newborn Care

VA Newborn Care Coverage and obtaining Non-VA Newborn Health Insurance Coverage.

VA Reimbursement for Pregnancy-Related Classes.

VA Coverage of Nursing Bras, Breast Pumps and Supplies.

VA Coverage of Emergency Care, including hospitalizations. Process for after-hours authorization.

VA Coverage of Medications. They are only to be filled at VA pharmacies.

Patient Response to Receiving a Bill from an Approved Community Care Provider.

Additional Comments:

AFTER:

Group: VA-GP MCC COVERAGE OF NEWBORN CARE MAIN
 Text: VA Coverage of Maternity and Newborn Care

Element: VA-MCC COVERAGE OF NEWBORN CARE
 Text: VA Newborn Care Coverage and obtaining Non-VA Newborn Health Insurance Coverage.

Element: VA-MCC COVERAGE OF NEWBORN CARE PROVIDER
 Text: VA Coverage Policies for Pregnancy-related Education and Lactation Support.

Element: VA-MCC COVERAGE OF NEWBORN CARE DATE
 Text: VA Coverage of Nursing Bras, Breast Pumps and Supplies.

Element: VA-MCC COVERAGE OF EMERGENCY CARE
 Text: VA Coverage of Hospitalizations, Emergency Care and the Emergency Treatment Notification Process.

Element: VA-MCC COVERAGE OF MEDICATIONS
 Text: VA Coverage and Process for Obtaining Medications Prescribed by an approved Community Care Provider.

Element: VA-MCC COVERAGE OF NEWBORN CARE BENEFITS
 Text: Guidance for Addressing Billing Inquiries from an approved Community Care Provider.

Element: VA-MCC COVERAGE OF NEWBORN CARE COMMENTS
 Text: Additional Comments: {FLD:TEXT NO LIMIT}

Reminder Dialog Template: VA-MATERNITY CARE COORDINATION

VA Coverage of Maternity and Newborn Care

VA Newborn Care Coverage and obtaining Non-VA Newborn Health Insurance Coverage.

VA Coverage Policies for Pregnancy-related Education and Lactation Support.

VA Coverage of Nursing Bras, Breast Pumps and Supplies.

VA Coverage of Hospitalizations, Emergency Care and the Emergency Treatment Notification Process.

VA Coverage and Process for Obtaining Medications Prescribed by an approved Community Care Provider.

Guidance for Addressing Billing Inquiries from an approved Community Care Provider.

Additional Comments:

3. Reminder ELEMENT: VA-MISC 20 HFS

Change Made: The element was created to house three Health Factors that have been updated to fall under different categories.

BEFORE:

VA-ONC PRCA RADIATION THERAPY RECURRENCE PATHWAY

Print Name: Radiation Therapy Recurrence Clinical Pathway

Entry Type: FACTOR

Category: VA-ONC PRCA RADIATION THERAPY RECURRENCE PATHWAY [C]

VA-ONC PRCA MOLECULAR TESTING

Print Name: Prostate Cancer Molecular Testing Pathway

Entry Type: FACTOR

Category: VA-ONC MOLECULAR TESTING [C]

VA-ONC PRCA CRPC M0 <=10M CLIN TRIAL

Print Name: CRPC M0 PSA DT <=10M Clinical Trial

Entry Type: FACTOR

Category: VA-ONCOLOGY PATHWAYS [C]

AFTER:

ELEMENT: VA-MISC 20 HFS

Finding: VA-ONC PRCA RADIATION THERAPY RECURRENCE PATHWAY
Additional findings:
HF VA-ONC PRCA MOLECULAR TESTING
HF VA-ONC PRCA CRPC M0 <=10M CLIN TRIAL

VA-ONC PRCA RADIATION THERAPY RECURRENCE PATHWAY

Print Name: Radiation Therapy Recurrence Clinical Pathway
Entry Type: FACTOR
Category: VA-ONCOLOGY PATHWAYS [C]

VA-ONC PRCA MOLECULAR TESTING

Print Name: Prostate Cancer Molecular Testing Pathway
Entry Type: FACTOR
Category: VA-ONCOLOGY PATHWAYS [C]

VA-ONC PRCA CRPC M0 <=10M CLIN TRIAL

Print Name: CRPC M0 PSA DT <=10M Clinical Trial
Entry Type: FACTOR
Category: VA-ONC PRCA CRPC M0 PATHWAY [C]

4. **Reminder GROUPS: VA-GP EYE CARE AT-RISK OUTSIDE EXAM-DIABETIC and VA-GP EYE CARE AT-RISK OUTSIDE EXAM-NON DIABETIC**

Change Made: The alternate progress note text was edited to include 'Optometrist or Ophthalmologist'.

These groups reside in the VA-EYE CARE AT-RISK SCREEN (NURSING) reminder dialog

BEFORE:

GROUP: VA-GP EYE CARE AT-RISK OUTSIDE EXAM-DIABETIC
GROUP HEADER ALTERNATE P/N TEXT:
No Referral Ordered:\\
Eye exam was performed elsewhere

GROUP: VA-GP EYE CARE AT-RISK OUTSIDE EXAM-NON DIABETIC
GROUP HEADER ALTERNATE P/N TEXT:
No Referral Ordered:\\
Eye exam was completed elsewhere

AFTER:

GROUP: VA-GP EYE CARE AT-RISK OUTSIDE EXAM-DIABETIC
GROUP HEADER ALTERNATE P/N TEXT:
No Referral Ordered:\\
Eye exam was performed elsewhere by an Optometrist or an Ophthalmologist

GROUP: VA-GP EYE CARE AT-RISK OUTSIDE EXAM-NON DIABETIC

GROUP HEADER ALTERNATE P/N TEXT:

No Referral Ordered:\\

Eye exam was completed elsewhere by an Optometrist or Ophthalmologist

Reminder Resolution: Eye Care At-Risk Screen

Cohort:
None Identified from past record query

PREREQUISITES for Tele-Eye Screening:
Patient does not report any of the following:
1. Recent sudden change in vision, double vision, eye pain, or eye injury/trauma
2. Blindness or vision in only one eye
3. Received retinal laser or eye injection for retinopathy within the last 2 years (if known)

Action:

Tele-Eye Screening Requested (Recommended unless exclusions identified above)

Comprehensive Eye Exam Requested:

Exclusion to TeleEye Screening Identified: Refer to clerical associate to schedule non-overbook Eye Clinic appointment

Eyeglasses: Refer to clerical associate to schedule non-overbook Eye Clinic appointment

Active eye problems/symptoms: Refer to clerical associate to schedule direct access Eye Clinic appointment

Outside eye exam of retina was performed by Optometrist or Ophthalmologist within the past year (or within past 2 years if diabetic has negative history of retinopathy):

Results:

Negative for Retinopathy

Positive for Retinopathy

Clear Clinical Maint Vnt Info < Back Next > Finish Cancel

pseudoexfoliation of lens, left eye, indeterminate stage rank: PRIMARY
Prov. Narr. - Capsular glaucoma with pseudoexfoliation of lens, left eye, indeterminate stage

Action:
No Referral Ordered:
Eye exam was performed elsewhere by an Optometrist or an Ophthalmologist

5. Reminder GROUPS: VA-LST DMC GROUP QUERY (G) and VA-LST INFORMED CONSENT QUERY 2 (G)

Change Made: The multiple selection field was set to ONE SELECTION ONLY to ensure user is guided properly for missing required items in the dialog.

These groups reside in the VA-LIFE-SUSTAINING TREATMENT (D) reminder dialog.

BEFORE:

GROUP: VA-LST DMC GROUP QUERY (G)

DISABLE:

CLASS: NATIONAL//

GROUP CAPTION:

PUT A BOX AROUND THE GROUP:

SHARE COMMON PROMPTS:

MULTIPLE SELECTION:

HIDE/SHOW GROUP: SHOW//

GROUP HEADER DIALOG TEXT:

*1. Decision-Making Capacity to Make Decisions About Life-Sustaining Treatments

GROUP: VA-LST INFORMED CONSENT QUERY 2 (G)

DISABLE:

CLASS: NATIONAL//

GROUP CAPTION:

PUT A BOX AROUND THE GROUP:NO

SHARE COMMON PROMPTS:

MULTIPLE SELECTION:

HIDE/SHOW GROUP: SHOW//

GROUP HEADER DIALOG TEXT:

*6. Informed Consent

AFTER:

GROUP: **VA-LST DMC GROUP QUERY (G)**

DISABLE:

CLASS: NATIONAL//

GROUP CAPTION:

PUT A BOX AROUND THE GROUP: YES

SHARE COMMON PROMPTS:

MULTIPLE SELECTION: ONE SELECTION ONLY

HIDE/SHOW GROUP: SHOW//

GROUP HEADER DIALOG TEXT:

*1. Decision-Making Capacity to Make Decisions About Life-Sustaining Treatments

GROUP: **VA-LST INFORMED CONSENT QUERY 2 (G)**

DISABLE:

CLASS: NATIONAL//

GROUP CAPTION:

PUT A BOX AROUND THE GROUP: YES

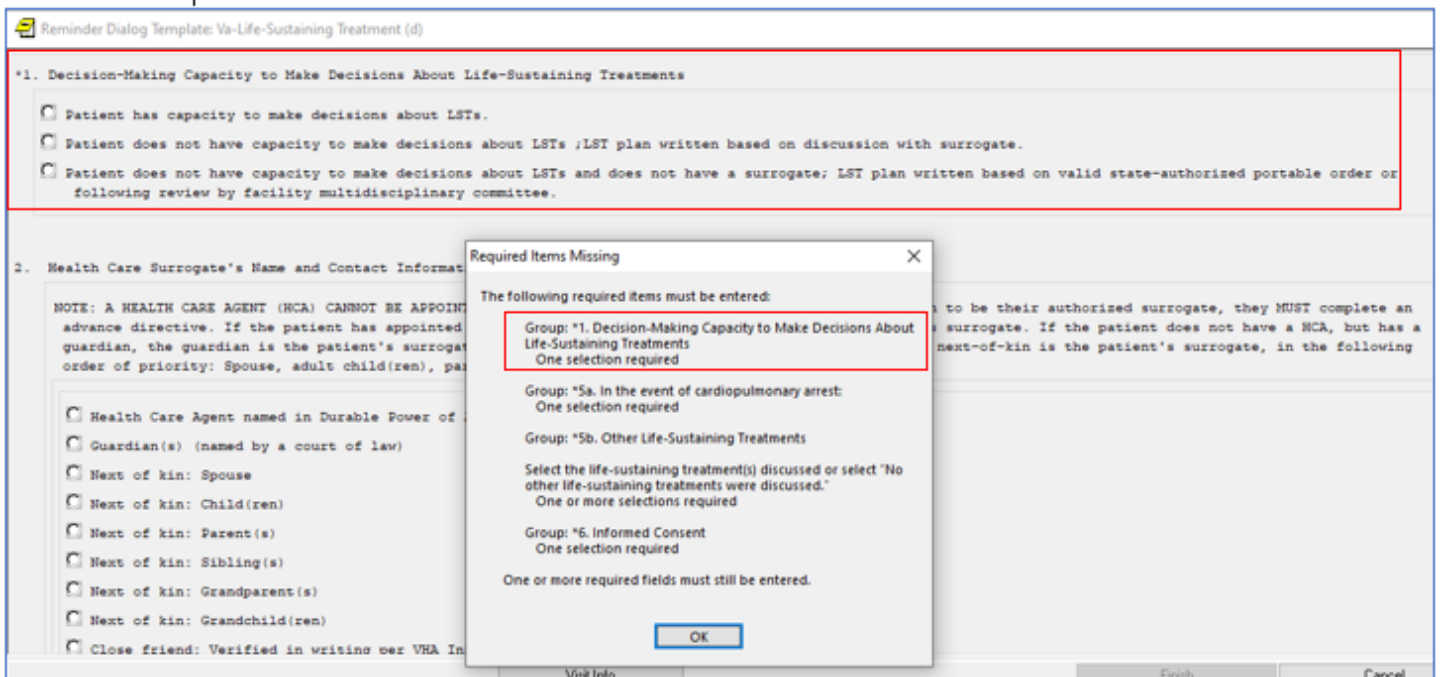
SHARE COMMON PROMPTS:

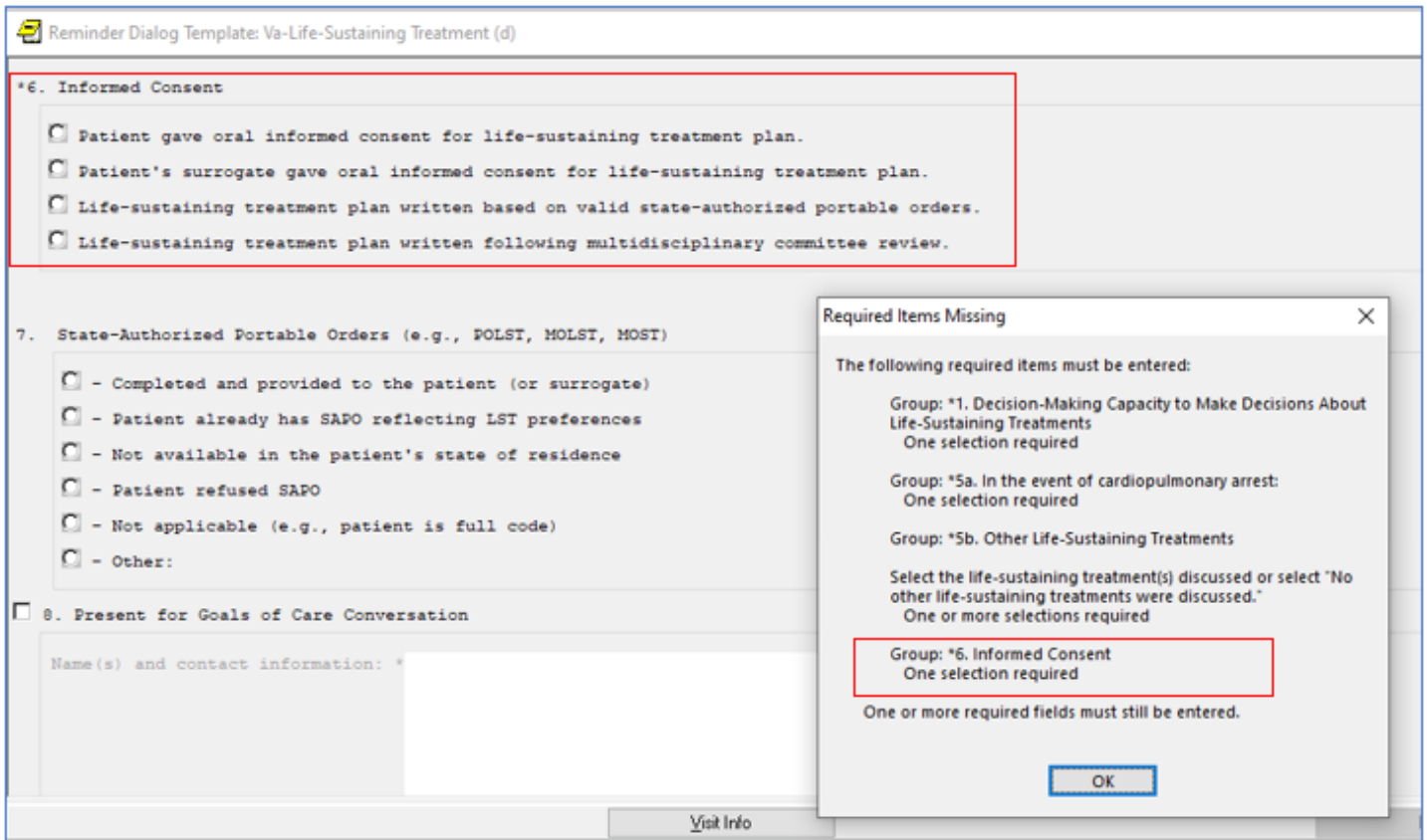
MULTIPLE SELECTION: ONE SELECTION ONLY

HIDE/SHOW GROUP: SHOW//

GROUP HEADER DIALOG TEXT:

*6. Informed Consent





6. Reminder ELEMENT: VA-RADIOLOGY SCHEDULE/CANCEL SUBMIT ORDER

Change Made: “Yes” was removed from the ‘Exclude from Progress Note’ field to ensure the alternate progress note text populates into the progress note.

This element resides in the VA-RADIOLOGY SCHEDULING CANCELLATION DELAY reminder dialog.

BEFORE:

```

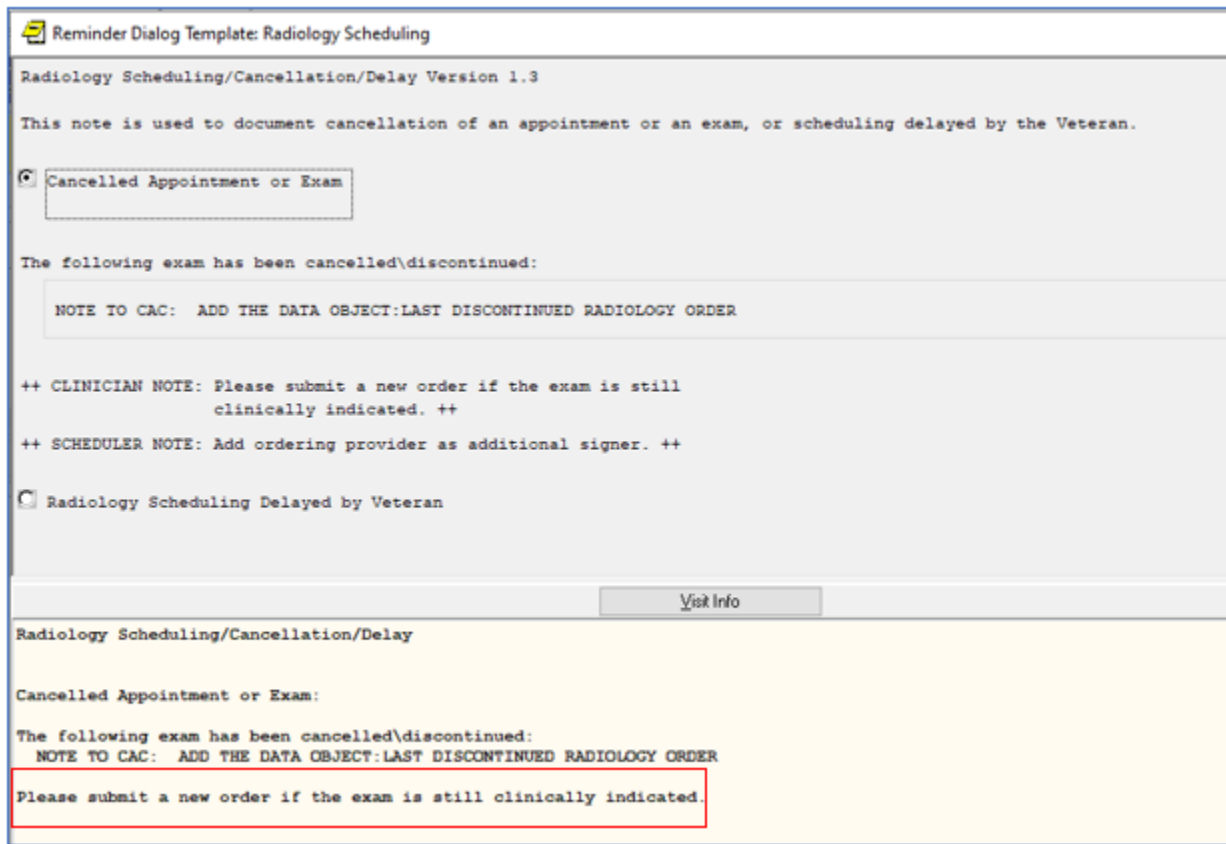
ELEMENT: VA-RADIOLOGY SCHEDULE/CANCEL SUBMIT ORDER
CLASS: NATIONAL//
DIALOG/PROGRESS NOTE TEXT:
\\
++ CLINICIAN NOTE: Please submit a new order if the exam is still
                    clinically indicated. ++\\
    Edit? NO//
ALTERNATE PROGRESS NOTE TEXT:
\\
Please submit a new order if the exam is still clinically indicated.\\

```

```
\\
  Edit? NO//
EXCLUDE FROM PROGRESS NOTE: YES
```

AFTER:

```
ELEMENT: VA-RADIOLOGY SCHEDULE/CANCEL SUBMIT ORDER
CLASS: NATIONAL//
DIALOG/PROGRESS NOTE TEXT:
\\
++ CLINICIAN NOTE: Please submit a new order if the exam is still
                    clinically indicated. ++\\
  Edit? NO//
ALTERNATE PROGRESS NOTE TEXT:
\\
Please submit a new order if the exam is still clinically indicated.\\
\\
  Edit? NO//
EXCLUDE FROM PROGRESS NOTE:
```



7. Reminder ELEMENT: **VA-HISTORY OF SUICIDE BEHAVIOR**

Change Made: The link to the **CAPRI, REACH VET, Risk Indicators, STORM Tool for Analytic Lookup (CRISTAL)** report has been updated.

This element resides in the VA-OSP SUICIDE RISK ASSESSMENT reminder dialog.

BEFORE:

ELEMENT: VA-HISTORY OF SUICIDE BEHAVIOR Replace
DISABLE:
CLASS: NATIONAL//

DIALOG/PROGRESS NOTE TEXT:

Previous suicide attempts documented in the Suicide Behavior and Overdose Report (SBOR) or by previous CSREs.\\
|VA-SBOR EVENT DATE|\\
\\The CAPRI, REACH VET, Risk Indicators, STORM Tool for Analytic Lookup (CRISTAL) dashboard is another resource to check the patient record for details of prior suicide behaviors:
{FLD:VA-OSP CRISTAL}\\
\\Suicide Attempt: A non-fatal self-inflicted potentially injurious behavior with any intent to die as a result of the behavior.

Link:
REDACTED LINK

AFTER:

ELEMENT: VA-HISTORY OF SUICIDE BEHAVIOR Replace
DISABLE:
CLASS: NATIONAL//

DIALOG/PROGRESS NOTE TEXT:

Previous suicide attempts documented in the Suicide Behavior and Overdose Report (SBOR) or by previous CSREs.\\
|VA-SBOR EVENT DATE|\\
\\The CAPRI, REACH VET, Risk Indicators, STORM Tool for Analytic Lookup (CRISTAL) dashboard is another resource to check the patient record for details of prior suicide behaviors:
{FLD:VA-OSP CRISTAL}\\
\\Suicide Attempt: A non-fatal self-inflicted potentially injurious behavior with any intent to die as a result of the behavior.

Link:
REDACTED LINK

Reminder Dialog Template: Va-Osp Suicide Risk Assessment

Suicidal Behavior

Previous suicide attempts documented in the Suicide Behavior and Overdose Report (SBOR) or by previous CSREs.
No previous suicide attempts documented

The CAPRI, REACH VET, Risk Indicators, STORM Tool for Analytic Lookup (CRISTAL) dashboard is another resource to check the patient record for details of prior suicide behaviors: [CRISTAL dashboard](#)

Suicide Attempt: A non-fatal self-inflicted potentially injurious behavior with any intent to die as a result of the behavior.

Has the Veteran ever made a prior suicide attempt, including any reported today, other than those documented in the SBORs/past CSREs?

No
 Yes
 Unknown/Not reported

Previously documented preparatory behavior from prior SBORs or CSREs:
No previous preparatory behavior documented

Preparatory Behavior: Acts or preparation towards engaging in Self-Directed Violence, but before potential for injury has begun.

8. Reminder ELEMENTS: VA-ADNS WHY NOTIFY (E) and VA-ADNS HOW NOTIFY (E)

Change Made: The link to Form 10-0137A has changed and the link to Form 10-0137B has been removed (as it no longer exists)

These elements reside in the VA-ADVANCE DIRECTIVE NOTIFICATION AND SCREENING (D) reminder dialog.

BEFORE:

Element: VA-ADNS WHY NOTIFY (E)

Text: Per the Patient Self-Determination Act (PSDA) of 1990 and {FLD:VA-ETHICS-LINK-HB-1004-02}, all patients must be given written notification stating their right to accept or decline medical treatment, to designate a Health Care Agent, and to document their treatment preferences in an advance directive. Patients must be informed that VA does not discriminate against patients based on whether or not they have an advance directive. NOTE: {FLD:VA-ETHICS-FORM 10-0137A} satisfies this notification requirement. Consider also providing the patient with {FLD:VA-ETHICS-FORM 10-0137B}.

Element: VA-ADNS HOW NOTIFY (E)

Text: NOTE: Giving the patient a copy of the {FLD:VA-ETHICS-FORM 10-0137A} satisfies this requirement. Consider also providing the patient with {FLD:VA-ETHICS-FORM 10-0137B}.

Link: REDACTED LINK

AFTER:

Element: VA-ADNS WHY NOTIFY (E)

Text: Per the Patient Self-Determination Act (PSDA) of 1990 and {FLD:VA-ETHICS-LINK-HB-1004-02}, all patients must be given written notification stating their right to accept or decline medical treatment, to designate a Health Care Agent, and to document their treatment preferences in an advance directive. Patients must be informed that VA does not discriminate against patients based on whether or not they have an advance directive. NOTE: {FLD:VA-ETHICS-FORM 10-0137A} satisfies this notification requirement.

Element: VA-ADNS HOW NOTIFY (E)

Text: NOTE: Giving the patient a copy of the {FLD:VA-ETHICS-FORM 10-0137A} satisfies this requirement.

Link: REDACTED LINK

ADVANCE DIRECTIVE NOTIFICATION AND SCREENING

HELP ME understand when advance directive notification and screening is needed and when assistance should be offered.

*Must select one

ADVANCE DIRECTIVE NOTIFICATION AND/OR SCREENING PERFORMED: Provide the patient or representative with information about advance directives and ask if the patient has an advance directive.

ADVANCE DIRECTIVE NOTIFICATION: Provide the patient or representative with information about advance directives.

HELP ME understand the need to provide the patient with written notification about advance directives.

Per the Patient Self-Determination Act (PSDA) of 1990 and [VHA Handbook 1004.02](#), all patients must be given written notification stating their right to accept or decline medical treatment, to designate a Health Care Agent, and to document their treatment preferences in an advance directive. Patients must be informed that VA does not discriminate against patients based on whether or not they have an advance directive. NOTE:

[VA Form 10-0137A \(Your Rights Regarding Advance Directives\)](#) satisfies this notification requirement.

*Notification

I provided the patient or representative with written notification about advance directives.

I did not provide the patient or representative with written notification about advance directives because:



Department of Veterans Affairs

WHAT YOU SHOULD KNOW ABOUT ADVANCE DIRECTIVES

You have the right to accept or decline any recommended medical treatment. Normally, your doctor explains your options for health care and you get to decide what is best for you. But what happens if you are too sick to make decisions for yourself? Who would you want to make decisions for you? Does this person know what you would or wouldn't want? Questions like these can be hard to think about, but they're important. That's why VA wants you to know about advance directives.

What is an advance directive?

If you are ever too sick to make health care decisions for yourself, your surrogate will make health care decisions for you. You can name a specific person to be your surrogate in an advance directive, and that person is known as your Health Care Agent. An advance directive can also help your surrogate and health care team understand what medical and mental health care you would or would not want.

There are two types of advance directive forms. A **Durable Power of Attorney for Health Care** is a form that you can use to name any adult as your Health Care Agent. This person will have the legal right to make health care decisions for you if you are not able to do so. A **Living Will** is a form you can use to state your preferences about treatments you would or wouldn't want if you cannot make treatment decisions yourself. It can help your surrogate and others know what your preferences are.

You have the right to complete neither, one, or both types of advance directive forms. You will not be discriminated against based on whether or not you have an advance directive, and your decision to have or not have an advance directive will not affect your access to health care or other VHA services.

Who should I choose as my Health Care Agent?

When deciding on a Health Care Agent, it's best to choose someone you trust and who knows you well, because they will be asked to speak for you if you can't make health care decisions yourself. When you choose someone, you should talk to that person to make sure they are willing to be your Health Care Agent and willing to carry out your wishes.

9. Reminder ORDER CHECK RULE: **VA-NALOXONE FOR OPIOID USE DISORDER**

Change Made: The display name was edited (the length decreased to 64 characters). The display name is now “NALOXONE RECOMMENDED FOR OPIOID OR STIMULANT USE DISORDER”

BEFORE:

REMINDER ORDER CHECK RULE INQUIRY

VA-NALOXONE FOR OPIOID USE DISORDER

Display Name: **NALOXONE RECOMMENDED FOR OPIOID USE DISORDER OR STIMULANT USE DISORDER**

AFTER:

REMINDER ORDER CHECK RULE INQUIRY

VA-NALOXONE FOR OPIOID USE DISORDER

Display Name: **NALOXONE RECOMMENDED FOR OPIOID OR STIMULANT USE DISORDER**

10. Reminder TAXONOMY: **VA-ADVANCED LIVER DISEASE INPT DX**

Change Made: The problem list was added as a data source.

BEFORE:

VA-ADVANCED LIVER DISEASE INPT DX

Class: NATIONAL
Sponsor: NATIONAL GASTROENTEROLOGY & HEPATOLOGY PROGRAM
Review Date: MAY 17,2022

Description:
List of codes used to indicate the patient has advanced liver disease.

Inactive Flag:
Patient Data Source: IN
Use Inactive Problems:

AFTER:

VA-ADVANCED LIVER DISEASE INPT DX

Class: NATIONAL
Sponsor: NATIONAL GASTROENTEROLOGY & HEPATOLOGY PROGRAM
Review Date: OCT 31,2022

Description:
List of codes used to indicate the patient has advanced liver disease.

Inactive Flag:

Patient Data Source: IN,PL

Use Inactive Problems:

11. Reminder ELEMENT: VA-CRC RESULT LETTER CONTACT PCP

Change Made: The Dialog/Progress Note Text was changed from full text to a template field, to allow for local editing of the text, if needed.

This element resides in the VA-CRC COLON SCREENING DOCUMENTATION BEFORE reminder dialog.

BEFORE:

ELEMENT: VA-CRC RESULT LETTER CONTACT PCP
DISABLE:
CLASS: NATIONAL//
SPONSOR: VHA GI FIELD ADVISORY COMMITTEE//
REVIEW DATE:
RESOLUTION TYPE:
ORDERABLE ITEM:
FINDING ITEM:

Additional findings: none

Select ADDITIONAL FINDING:

DIALOG/PROGRESS NOTE TEXT:

Please contact your primary care team if it is time for your colonoscopy and the test has not been scheduled.

AFTER:

ELEMENT: VA-CRC RESULT LETTER CONTACT PCP
DISABLE:
CLASS: NATIONAL//
SPONSOR: VHA GI FIELD ADVISORY COMMITTEE//
REVIEW DATE:
RESOLUTION TYPE:
ORDERABLE ITEM:
FINDING ITEM:

Additional findings: none

Select ADDITIONAL FINDING:

DIALOG/PROGRESS NOTE TEXT:

{FLD:VA-CRC COLONOSCOPY SCHEDULE INSTRUCTIONS}

After reviewing your results I recommend:

You discuss with your primary care provider options for completing colon cancer screening in approximately:

You complete a follow-up colonoscopy in approximately:

****Critical Note****
Reminders will be set from TODAY, NOV 17, 2022 not from the date of the procedure/test.

1 month from TODAY, NOV 17, 2022

Order Colonoscopy

Please contact your primary care team if it is time for your colonoscopy and the test has not been scheduled.

12. Reminder TAXONOMY: VA-DEMENTIA DIAGNOSIS

Change Made: Additional ICD-10 codes have been included in the Taxonomy.

BEFORE:

TAXONOMY: VA-DEMENTIA DIAGNOSIS

This taxonomy includes the following numbers of codes:

ICD-10-CM: 32

ICD-9-CM: 30

Total number of codes: 62

AFTER:

TAXONOMY: VA-DEMENTIA DIAGNOSIS

This taxonomy includes the following numbers of codes:

ICD-10-CM: 101

ICD-9-CM: 30

Total number of codes: 131

ICD-10 Codes that were added:

F01.52
F01.53
F01.54
F01.511
F01.518
F01.A0
F01.A2
F01.A3
F01.A4
F01.A11
F01.A18
F01.B0
F01.B2
F01.B3
F01.B4
F01.B11
F01.B18
F01.C0
F01.C2
F01.C3
F01.C4

F01.C11
F01.C18
F02.82
F02.83
F02.84
F02.811
F02.818
F02.A0
F02.A2
F02.A3
F02.A4
F02.A11
F02.A18
F02.B0
F02.B2
F02.B3
F02.B4
F02.B11
F02.B18
F02.C0
F02.C2
F02.C3
F02.C4
F02.C11
F02.C18
F03.92
F03.93
F03.94
F03.911
F03.918
F03.A0
F03.A2
F03.A3
F03.A4
F03.A11
F03.A18
F03.B0
F03.B2
F03.B3
F03.B4
F03.B11
F03.B18
F03.C0
F03.C2
F03.C3
F03.C4

13. Reminder DEFINITION: VA-LIPID STATIN RX CVD/DM

Change Made: Finding Item 3 (VA-DIABETES MEDICATIONS) was removed from the definition, from the cohort logic and from Function Finding 4.

BEFORE:

VA-LIPID STATIN RX CVD/DM

Print Name: Assess Statin Use - Lipids (CVD/DM)

Customized PATIENT COHORT LOGIC to see if the Reminder applies to a patient:

((FI(1)&FF(1))!FI(2)!FI(3)&FF(4))!(FI(5)&FF(6))!(FI(15)&FF(15))&'
(FI(7)!FI(17)!FI(18)!FI(25))

Expanded Patient Cohort Logic:

((FI(VA-DIABETES HEDIS)&FF(1))!FI(VA-DIABETES HEDIS PROB LIST)!
FI(VA-DIABETES MEDICATIONS)&FF(4))!(FI(VA-IHD AND ASVD)&FF(6))!
(FI(VA-STATIN REVASCULARIZATION CODES)&FF(15))&'
(FI(VA-STATIN LIFE EXPECTANCY < 2 YEARS)!FI(VA-STATIN CIRRHOSIS)!
FI(VA-STATIN MUSCULAR PAIN AND DISEASE)!FI(VA-STATIN-ESRD))

Function Finding (4):

---- Begin: FF(4)-----

Function String: MRD(1,2,3)>MRD(4)

Expanded Function String:

MRD(VA-DIABETES HEDIS,VA-DIABETES HEDIS PROB LIST,
VA-DIABETES MEDICATIONS)>MRD(VA-DIABETES DX INCORRECT)

---- End: FF(4)-----

AFTER:

VA-LIPID STATIN RX CVD/DM

Print Name: Assess Statin Use - Lipids (CVD/DM)

Customized PATIENT COHORT LOGIC to see if the Reminder applies to a patient:

((FI(1)&FF(1))!FI(2))&FF(4))!(FI(5)&FF(6))!(FI(15)&FF(15))&'(FI(7)!
FI(17)!FI(18)!FI(25))

Expanded Patient Cohort Logic:

((FI(VA-DIABETES HEDIS)&FF(1))!FI(VA-DIABETES HEDIS PROB LIST))&FF(4))!
(FI(VA-IHD AND ASVD)&FF(6))!(FI(VA-STATIN REVASCULARIZATION CODES)&
FF(15))&'(FI(VA-STATIN LIFE EXPECTANCY < 2 YEARS)!
FI(VA-STATIN CIRRHOSIS)!FI(VA-STATIN MUSCULAR PAIN AND DISEASE)!
FI(VA-STATIN-ESRD))

Function Finding (4):

---- Begin: FF(4)-----
Function String: MRD(1,2)>MRD(4)
Expanded Function String:
MRD(VA-DIABETES HEDIS,VA-DIABETES HEDIS PROB LIST)>MRD
(VA-DIABETES DX INCORRECT)
---- End: FF(4) -----

14. Reminder GROUP: WH GP PAP SCREEN

Changes Made: Two Health Factors have been added as Finding Items within two (2) sub-elements, a new sub-element was added (i.e., HPV test obtained at this encounter) and text “Pap smear was obtained” was changed to “Cervical cytology obtained”.

This element resides in the VA-WH PAP SMEAR SCREENING reminder dialog.

BEFORE:

Group: WH GP PAP SCREEN
Text: Screening
 {FLD:VA-WH PAP INFORMATION}
Element: VA-WH PAP SMEAR OBTAINED
Text: Pap smear was obtained at this encounter
Element: VA-WH PAP HPV TESTING
Text: Order HPV testing
Group: VAL-WH ORDER PAP SMEAR
Text: Order pap smear
Group: VA-WH GP PAP OUTSIDE RESULTS
Text: Record prior or outside Pap and/or HPV results:

Screening
(Patients 30yo and older with abnormal pap and HPV+ may need referral for colposcopy.
Please follow ASSCP guidelines under the "View more information.." option above.)

PAP smear was obtained at this encounter

Order HPV testing

Order pap smear

Record prior or outside Pap and/or HPV results:

AFTER:

Group: WH GP PAP SCREEN
Text: Screening
 {FLD:VA-WH PAP INFORMATION}
Element: VA-WH PAP SMEAR OBTAINED
Text: Cervical cytology obtained at this encounter
Add. Finding: VA-WH CERVICAL CYTOLOGY OBTAINED (HEALTH FACTOR)
Element: VA-WH PAP HPV OBTAINED
Text: HPV test obtained at this encounter.
Finding: VA-WH HPV OBTAINED (HEALTH FACTOR)
Element: VA-WH PAP HPV TESTING
Text: Order HPV testing
Group: VAL-WH ORDER PAP SMEAR
Text: Order pap smear
Group: VA-WH GP PAP OUTSIDE RESULTS
Text: Record prior or outside Pap and/or HPV results:

Screening

(Patients 30yo and older with abnormal pap and HPV+ may need referral for colposcopy.
Please follow ASCCP guidelines under the "View more information.." option above.)

- Cervical cytology obtained at this encounter
- HPV test obtained at this encounter.
- Order HPV testing
- Order pap smear
- Record prior or outside Pap and/or HPV results: