

TELE-EYE IMAGER CONSULT NOTE

1. Change version from 5.0 to 6.1

Tele-Eye Screening Imager Note v 6.1

2. At location shown below, added this statement with required selections:

AT RISK FOR MACULAR DEGENERATION:

Macular Degeneration Risk Factors

Information:
Reminder Term: VA-AMD RISK FACTORS
Encounter Diagnosis:
09/01/2022@09:33:36 272.0 (ICD-10-CM) Tobacco use rank: PRIMARY
Prov. Narr. - Tobacco use

Personal history of Macular Degeneration reported
 Family history of Macular Degeneration reported
 Prior treatment for Macular Degeneration reported
 Smoking Status:
*
 Current
 Former
 Never

Last Retinal Evaluation:
 Date:
 Date unknown

Patient identity was verified with 2 separate identifiers prior to the beginning of visit:

0 Yes

0 No Comment: *<required text>

Patient identity was verified with 2 separate identifiers prior to the beginning of visit:

Yes
 No Comment: *

Last Retinal Evaluation:

3. At location shown below, added this statement with required selections:

 AT RISK FOR MACULAR DEGENERATION:

Macular Degeneration Risk Factors

Information:
 Reminder Term: VA-AMD RISK FACTORS
 Encounter Diagnosis:
 09/01/2022@09:33:36 Z72.0 (ICD-10-CM) Tobacco use rank: PRIMARY
 Prov. Narr. - Tobacco use

Personal history of Macular Degeneration reported
 Family history of Macular Degeneration reported
 Prior treatment for Macular Degeneration reported
 Smoking Status:
 *
 Current
 Former
 Never

Last Retinal Evaluation:
 Date:
 Date unknown

Patient was informed that their information and images will be uploaded securely to the VA computer system and sent to be remotely interpreted by a licensed VA eye care provider. Findings/recommendations will be conveyed to the primary care provider who will (either directly or by designee) ensure results are communicated timely and follow up care is coordinated as necessary. Patient verbalized understanding of process and consents to proceed:

0 Yes

0 No Comment: * <required text>

Patient was informed that their information and images will be uploaded securely to the VA computer system and sent to be remotely interpreted by a licensed VA eye care provider. Findings/recommendations will be conveyed to the primary care provider who will (either directly or by designee) ensure results are communicated timely and follow up care is coordinated as necessary. Patient verbalized understanding of process and consents to proceed:

Yes
 No

4. Added new statement with required selection (where shown below):

Method of retinal evaluation:

0 VA retinal imaging <include optional comment box>

0 VA eye clinic exam <include optional comment box>

0 VA funded community care <include optional comment box>

0 Private eye exam <include optional comment box>

0 Other Comment: * <required free text>

Last Retinal Evaluation:

Date:
 Date unknown

Information obtained by:
 Self-Report
 Chart documentation

Last Retinal Evaluation:

Date: Date: * 2023

Location: * Eye mart

Date unknown

Last Retinal Evaluation:

Date: Date: * 2023

Date unknown

Method of retinal evaluation:

VA Retinal Imaging

VA Eye Clinic Exam

VA Funded Community Care

Private Eye Exam

Other: *

Information obtained by:

Self-Report

Chart documentation

5. Edit the 'Date of Next Eye Appointment' by removing 'if known' and make a required element to complete:
Date of next eye appointment: <required selection>

0 Date: <expand to a date/location box, similar to the 'Last Retinal Evaluation' section above>

Date: Date: * 2023

Location: *

0 No future appointment scheduled <expands to below if selected, required option >

0 Veteran desires eye care through the VA

0 Veteran intends to seek non-VA provided/funded eye care

Date of Next Eye Appointment:

Scheduled:

No future appointment scheduled:

• Scheduled:

Date of Next Eye Appointment:

Scheduled: Date: * 2023 Location: *

No future appointment scheduled:

• No Future appt:

Date of Next Eye Appointment:

Scheduled:

No future appointment scheduled:

Veteran desires eye care through the VA

Veteran intends to seek non-VA provided/funded eye care

6. With above changes incorporating, removed the stand-alone optional select 'Veteran intends to seek...'

Veteran intends to seek non-VA provided or funded eye care.

7. Pupil Dilation section --if yes selected, under Dilation Procedure:

From this verbiage, remove the word 'local' to just say 'complaint with UAP directive...' as this is about to transition to a national directive

Imager compliant with UAP/local directive or has licensure/certification for administering eye drops for dilation. Veteran denies any allergies/prior reactions to dilation drops.

Pupils dilated by imager for eye screening

Imager compliant with UAP directive or has licensure/certification for administering eye drops for dilation. Veteran denies any allergies/prior reactions to dilation drops.

Yes

No

8. Pupil Dilation Section - Added optional comment box after each type of drop:

Dilation drop(s) administered: *

- 0.5% Tropicamide
- 1% Tropicamide
- 2.5% Phenylephrine
- 0.5% Proparacaine

Dilation Procedures:

Dilation drop(s) administered:

- 0.5% Tropicamide Comment:
- 1% Tropicamide Comment:
- 2.5% Phenylephrine Comment:
- 0.5% Proparacaine Comment:
- Other: *

Number of drops instilled each eye: *0

Time of installation: *

Additional comments

9. Renamed 'DISPOSITION' to 'PATIENT EDUCATION'

And since we moved the procedure consent to the top of the template, can remove crossed out items from this section

DISPOSITION:

- Patient to proceed with Tele-Eye Screening image capture
- Consult sent to Eye clinic requesting comprehensive eye exam for this patient.

Patient received patient education on routine eye care and the following:

*

- Diabetic Eye Disease
- Glaucoma
- Macular Degeneration
- Other:

~~Patient was informed that images will be uploaded to the VA computer system and sent to be remotely viewed by an eye provider, and recommendations will be conveyed to their primary care provider. Patient understood and agreed to have images taken.~~

Comment:

EDUCATION:

Patient received patient education on routine eye care and the following:

*

Diabetic Eye Disease

Glaucoma

Macular Degeneration

Other: _____

Comment: _____

10. Add statement regarding result notification

EDUCATION:

Patient received patient education on routine eye care and the following:

*

Diabetic Eye Disease

Glaucoma

Macular Degeneration

Other: _____

Comment: _____

Patient was informed on how and when results should be received. Patient was instructed on how to contact the appropriate clinical area if results are not received within expected timeframe.

Yes

No

- Yes

Patient was informed on how and when results should be received. Patient was instructed on how to contact the appropriate clinical area if results are not received within expected timeframe.

Yes

No

- No

Patient was informed on how and when results should be received. Patient was instructed on how to contact the appropriate clinical area if results are not received within expected timeframe.

Yes

No Specify Reason: * _____

FOLLOW-UP Note:

11. Added a statement regarding where to find consult results details

FOLLOW-UP Note
(Only necessary for Interfacility consult results, not local results)

Tele-Eye Imaging Consult request has been COMPLETED. The summary of findings are below. To view a detailed report from the eye provider (reader), with the case selected on the CONSULT tab, use the top toolbar to select ACTION > CONSULT TRACKING > DISPLAY RESULTS.

Consult Results:

Diabetic Retinopathy:

Normal - No Diabetic Retinopathy Apparent

Abnormal - Diabetic Retinopathy Present

Unable to Assess

N/A - Patient is NOT diabetic

Macula findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

Optic Nerve Head Findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

Other Assessment Findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

Veteran is NOT a candidate for future eye screening.

Additional comments:

12. Macula Findings

1. Change to Macular Degeneration

Macular Degeneration:

13. Optic Nerve Head Findings

- 1. Change to Glaucoma

Glaucoma:

14. Other Assessment Findings

- 1. Change to Other Time-Sensitive Findings

Other Time-Sensitive Findings:

15. When 'Normal' is selected on the **Macula, Optic Nerve, or Other Assessment Findings** sections, please edit so that rather than it just say 'Normal', it says: **Normal - Age Appropriate Findings**

*leave the diabetic retinopathy verbiage as is

FOLLOW-UP Note

Screening Results:

Macula: Normal - Age appropriate findings

Optic Nerve: Normal - Age appropriate findings

Other Assessment: Normal - Age appropriate findings

INITIAL note

FOLLOW-UP Note

(Only necessary for Interfacility consult results, not local results)

14. Consult Results>Normal

- a. Diabetes

- i. Change Progress Note Text

Screening Results:

Diabetic Retinopathy: Normal - No diabetic retinopathy apparent

15. Consult Results>Normal

- a. Macular Degeneration

- i. Change Progress Note Text

Screening Results:

Macula Degeneration: Normal - No macular degeneration apparent

16. Consult Results>Normal

- a. Optic Nerve Head Finding

- i. Change Progress Note Text

Screening Results:

Glaucoma: Normal - No glaucomatous nerve damage apparent

17. Consult Results>Normal

- a. Other Assessment Findings

- i. Change Progress Note Text

Screening Results:

Other Assessment: Normal - No other time-sensitive findings

18. Consult Results>Normal

- a. Other Assessment Findings

- i. Change dialog text

Other Time-Sensitive Findings:

No other time-sensitive findings

- 19. Consult Results>Normal
 - a. Other Assessment Findings
 - i. Change progress note text

CONSULT RESULTS:

Other Findings: No other time-sensitive findings

CONSULT RESULTS:

Diabetic Retinopathy: Normal - No diabetic retinopathy apparent

Macular Degeneration: Normal - No macular degeneration apparent

Glaucoma: Normal - No glaucomatous nerve damage apparent

Other Findings: No other time-sensitive findings

- 20. When 'Abnormal' is selected on the Macula, Optic Nerve, or Other Assessment Findings sections, edit to:
 - Abnormal – Demonstrates need for follow up care**

Macula:	Abnormal	- Demonstrates need for follow up care
Optic Nerve:	Abnormal	- Demonstrates need for follow up care
Other Assessment:	Abnormal	- Demonstrates need for follow up care

Dialog text:

Macula findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

Optic Nerve Head Findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

Other Assessment Findings:

Normal - Age appropriate findings

Abnormal - Demonstrates need for follow up care

Unable to Assess

- 21. Consult Result>Abnormal
 - a. Diabetic
 - i. Change RD template Text
 - ii. Change Progress Note Text

Diabetic Retinopathy:

Normal - No diabetic retinopathy apparent

Abnormal - Diabetic Retinopathy Present

Screening Results:
Diabetic Retinopathy: Abnormal - Diabetic Retinopathy Present

- 22. Consult Result>Abnormal
 - a. Macular Degeneration
 - i. Change RD template Text
 - ii. Change Progress Note Text

Macular Degeneration:

Normal

Abnormal

Unable to Assess

Screening Results:
Macular Degeneration: Abnormal - Further Assessment Needed

- 23. Consult Result>Abnormal
 - a. Glaucoma
 - i. Change RD template Text
 - ii. Change Progress Note Text

Glaucoma:

Normal

Abnormal

Unable to Assess

Screening Results:
Glaucoma: Abnormal - Further Assessment Needed

- 24. Consult Result>Abnormal
 - a. Other Time-Sensitive Findings
 - i. Change RD template Text
 - ii. Change Progress Note Text

Other Time-Sensitive Findings:

Normal

Abnormal

Unable to Assess

Screening Results:
Other Assessment: Abnormal - Further Assessment Needed

- 25. Consult Result>Abnormal
 - a. Other Time-Sensitive Findings
 - i. Change Dialog text

Other Time-Sensitive Findings:

No other time-sensitive findings

Abnormal - Further assessment needed

Screening Results:

Diabetic Retinopathy: Abnormal - Diabetic Retinopathy Present

Macular Degeneration: Abnormal - Further Assessment Needed

Glaucoma: Abnormal - Further Assessment Needed

Other Assessment: Abnormal - Further Assessment Needed

- 26. Consult Results>Unable to Assess
 - a. Macular Degeneration
 - i. Change Progress Note Text

Screening Results:

Macular Degeneration: Unable to Assess

- 27. Consult Results>Unable to Assess
 - a. Glaucoma
 - i. Change Progress Note Text

Screening Results:

Glaucoma: Unable to Assess

Screening Results:

Diabetic Retinopathy: Unable to Assess

Macular Degeneration: Unable to Assess

Glaucoma: Unable to Assess

Other Assessment: Unable to Assess

- 28. Consult Results>Diabetic Retinopathy>Normal
 - a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXR TRR EXAM RETINOPATHY RESULTS-NORMAL
 - b. Remove sequence 3 from element
 - i. PXR Comment

- 29. Consult Results>Diabetic Retinopathy>Abnormal
 - a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXR TRR EXAM RETINOPATHY RESULTS-ABN
 - b. Remove sequence 3 from element
 - i. PXR Comment

- 30. Consult Results>Diabetic Retinopathy>Unable to Assess
 - a. Remove sequence 1 from element
 - i. PXR Comment

- 31. Consult Results>Macula>Normal
 - a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXR TRR EXAM MACULA RESULTS-NORMAL
 - b. Remove sequence 3 from element
 - i. PXR Comment

32. Consult Results>Macula>Abnormal

- a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXRMR TRR EXAM MACULA RESULTS-ABNORMAL
- b. Remove sequence 3 from element
 - i. PXRMR Comment

33. Consult Results>Macula>Unable to Assess

- a. Remove sequence 1 from element
 - i. PXRMR Comment

34. Consult Results>Optic Nerve>Normal

- a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXRMR TRR EXAM OPTIC NERVE RESULTS-NORMAL
- b. Remove sequence 3 from element
 - i. PXRMR Comment

35. Consult Results>Optic Nerve>Abnormal

- a. Remove sequence 1 from element (No longer an active prompt)
 - i. PXRMR TRR EXAM OPTIC NERVE RESULTS-ABNORMAL
- b. Remove sequence 3 from element
 - i. PXRMR Comment

36. Consult Results>Optic Nerve>Unable to Assess

- a. Remove sequence 1 from element
 - i. PXRMR Comment

37. Consult Results>Other Assessment>Normal

- a. Remove sequence 1 from element
 - i. PXRMR Comment

38. Consult Results>Other Assessment>Abnormal

- a. Remove sequence 1 from element
 - i. PXRMR Comment

39. Consult Results>Other Assessment>Unable to Assess

- a. Remove sequence 1 from element
 - i. PXRMR Comment

40. Add **reader recommendations to template**

READER RECOMMENDATIONS:

- Repeat imaging appointment:
- Refer for comprehensive face-to-face eye exam
- Veteran to keep future VA Eye Clinic appointment as scheduled
- Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation is to be seen:

- Repeat imaging

Repeat imaging appointment:

Return to Imaging - ...

Return 1 year

Return 2 years per EPRP (External Peer Review Program)

Other:

- FTF visit

Refer for comprehensive face-to-face eye exam

Refer to:

VA Ophthalmology

VA Optometry

EITHER VA Ophthalmology or VA Optometry

As soon as possible - Time Sensitive

1 month: Apr 29, 2023 ...

2 months: May 29, 2023 ...

3 months: Jun 29, 2023 ...

4 months: Jul 29, 2023 ...

6 months: Sep 29, 2023 ...

9 months: Dec 29, 2023 ...

1 year: Mar 28, 2024 ...

2 years: Mar 28, 2025 ...

- VA Eye Clinic

Veteran to keep future VA Eye Clinic appointment as scheduled:

- Outside eye provider

As soon as possible - Time Sensitive

1 month: Apr 29, 2023 ...

2 months: May 29, 2023 ...

3 months: Jun 29, 2023 ...

4 months: Jul 29, 2023 ...

6 months: Sep 29, 2023 ...

9 months: Dec 29, 2023 ...

1 year: Mar 28, 2024 ...

2 years: Mar 28, 2025 ...

Health Summary Type change

41. TRI HGBA1C

a. Change to Time Limit=2 Years and Occurrence Limit=3

Type Name: TRI HGBA1C

Title: TRI HGBA1C

Owner: GRIFFITH,ELIZABETH A
SUPPRESS PRINT OF COMPONENTS WITHOUT DATA: yes
SUPPRESS SENSITIVE PRINT DATA: NO SSN

Abb	Ord	Component Name	Max	Hos	ICD	Pro	CPT	Occ	Time	Loc	Text	Nar	Mod	Selection
SLT	5	Lab Tests Selected	3	2Y										

New data object:

- 42. Reminder Term Creation for Data Object
 - a. Will display if the patient is on Semaglutide
 - b. Look back 18 months
 - i. Semaglutide 0.5mg/0.375ml Inj Pen 1.5ml
 - ii. Semaglutide 1mg/0.75ML Inj Pen 3ml (CPC)
- VA-BL SEMAGLUTIDE RX

- 43. Reminder Creation for Data Object
VA-OBJ TELE-EYE MEDICATION-SEMAGLUTIDE

- 44. Health Summary Type Creation
Type Name: VA-OBJ SEMAGLUTIDE MED

- 45. Health Summary Object Creation
OBJECT NAME: VA-OBJ SEMAGLUTIDE MED

- 46. TIU Data Object Creation
TIU Object Name: VA-DM HIGH-RISK MEDS

- 47. Add Data Object to template
 - a. Add to Diabetic Med Section
VA-OBJ DIABETES HIGH-RISK MEDS

Without Medication:

DIABETIC AND AT RISK FOR DIABETIC RETINOPATHY:

Diabetes Diagnosis

Information:

Problem Diagnosis:
04/19/2023 44054006 (SNOMED CT) Type 2 diabetes mellitus
Date Entered: 04/19/2023; Date Last Modified: 04/19/2023
Status: ACTIVE; Priority: UNDEFINED
Prov. Narr. - Diabetes Mellitus Type 2 (SCT 44054006)

Type 1 Diabetic Patient

Type 2 Diabetic Patient

Other:

With Medication (Semaglutide med not on NatRem):

There is a risk of developing and/or worsening of existing retinopathy, so more frequent eye visits/screenings are needed.

Diabetes High Risk Medication

Cohort:

Reminder Term: VA-BL SEMAGLUTIDE RX

Drug: LACTULOSE SYR 80Z

Non-VA med: LACTULOSE

04/19/2023 Status: ACTIVE

Start Date: 04/19/2023 Discontinued Date: NONE Duration: 0 D

Dosage Form: SYRUP Dosage: 0.5 MG Medication Route: ORAL

48. Last Retinal Evaluation

- Removed prompt and replaced with template field

49. Date of Next Eye Appointment

- i. Added placeholder for local data object for future eye appointment dates
- ii. Removed prompt and replaced with template field

50. Changed dialog text for repeat imaging appointment>Return 2 years per EPRP to Return 2 years

51. Changed dialog text for Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation: to Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommended timeline for care:

52. Added Reader HFs as additional findings to all of the eye exam result selections