



LABORATORY
CURRENT PROCEDURAL
TERMINOLOGY (CPT) CODES AND
MODIFIERS PATCH LR*5.2*263
INSTALLATION AND IMPLEMENTATION
GUIDE

Version 5.2

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Department of Veterans Affairs
Veterans Health Administration
Office of Information Field Office



Preface

The Veterans Health Information Systems and Architecture (**VISTA**) Laboratory Current Procedural Terminology (CPT) Codes and Modifiers Patch LR*5.2*263 is an enhancement patch for the **VISTA** Laboratory software application. The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Installation and Implementation Guide provides detailed instructions for installing the patch and setup instructions required for implementing the new software functionality.

Installation and Implementation Guide Orientation

Pre-installation Information: This section contains information needed by the Information Resource Management (IRM) staff member and the Laboratory Information Manager (LIM) **prior** to installing the **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263.

Installation Instructions: This section provides instructions and examples for installing the **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263.

Post Installation Information: This section provides information pertaining to the new file structure after the installation of Patch LR*5.2*263.

First Time Laboratory CPT Workload Information: This section provides setup instructions and software logic information for sites that are **NOT** currently using the Laboratory workload reporting functionality.

Laboratory CPT Workload Reporting Information: This section provides setup instructions and software logic information for sites that are **ALREADY** using the Laboratory workload reporting functionality **prior** to the installation of this patch.

Venipuncture Workload Reporting Information: This section provides setup instructions and software logic information for implementing the **NEW** automated Venipuncture workload reporting software functionality.

Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Test Plan: This test plan may be used as a guide for testing the functionality changes after the installation and implementation of this patch.



Installation and Implementation Guide Distributions

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Installation and Implementation Guide distributions are as follows:

Electronic Distributions

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Installation and Implementation Guide are available in Portable Document Format (PDF) (LR_CPTIG.PDF) at the following Intranet address:

http://vista.med.va.gov/softserv/clin_nar.row/lab/index.html

Anonymous Software Accounts

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Installation and Implementation Guide is available in PDF (i.e., LR_CPTIG.PDF) at the following FTP addresses:

Office of Information Field Office	FTP Address	Directory
Albany	152.127.1.5	anonymous.software
Hines	152.129.1.110	anonymous.software
Salt Lake City	152.131.2.1	anonymous.software

Installation and Implementation Guide Display Symbols

Screen Captures

The computer dialogue appears in Courier font, no larger than 10 points.

Example: Courier font 10 points

User Response

User entry response appears in boldface type Courier font, no larger than 10 points. **Example:** Boldface type

Return Symbol

User response to computer dialogue is followed by the <RET> symbol that appears in Courier font, no larger than 10 points, and bolded. **Example:** <RET>

Tab Symbol

User response to computer dialogue is followed by the symbol that appears in Courier font, no larger than 10 points, and bolded. **Example:** <Tab>

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Introduction

The **VISTA** Laboratory Current Procedural Terminology (CPT) Codes and Modifiers Patch LR*5.2*263 is a major software enhancement for the **VISTA** Laboratory Version 5.2 workload reporting functionality. The software enhancement provides the ability to transmit CPT codes and modifiers to the Patient Care Encounter (PCE) workload reporting Application Programming Interface (API).

VISTA Laboratory V. 5.2 software logic is modified to accomplish the transmission of CPT codes and modifiers to the PCE workload reporting API. This was accomplished by the enhanced LRNIGHTY background job method requiring no user interaction for Laboratory workload reporting.

The CPT Codes and Modifiers Patch LR*5.2*263 software enhancement indicates when a service or a procedure has been performed and subsequently altered by some specific circumstances with no changes in the definition or code. The judicious application of modifiers obviates the necessity for separate procedure listing that may describe the modifying circumstances.

NOTE: Only patient lab test orders with the HOSPITAL LOCATION file (#44), TYPE field (#3) defined with clinic, module, or other will receive CPT workload credit.

The CPT Codes and Modifiers Patch LR*5.2*263 software enhancements also includes the **new** automated Venipuncture workload reporting functionality. Originally, the Laboratory workload reporting software did not include Venipuncture workload reporting as an automated billable procedure. Therefore, Laboratory personnel had to manually enter Venipuncture workload billable procedures daily. Venipuncture workload billable procedures are now automated. Venipuncture workload reporting billable procedures are collected by institution, by date, by WKLD Code, and by event time. However, certain required data elements (i.e., MAJ, SECT and SUBSECTION fields) had to be defined to achieve the new automate functionality. The automate Venipuncture workload reporting software automatically determines these fields using file setup information. This new automated functionality is identical to the other types of Laboratory workload reporting functionalities. The Venipuncture workload data will appear on workload reports using the standard Laboratory workload reporting criteria.

VISTA Blood Bank Software Version 5.2

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 enhancements does not contain any changes to the **VISTA** Laboratory Blood Bank V. 5.2 software application as defined by VHA DIRECTIVE 99-053 titled **VISTA** Blood Bank Software Version 5.2.



Overview

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 software consist of the following enhancements and modifications:

Enhancements and Modifications

NOTE: The asterisk (*) indicates significant enhancements and file structure changes.

*1. **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 software automatically removes CPT workload credit for any test(s) with the status of NOT PERFORMED (NP).

*2. When the enhanced LRNIGHTY background job is tasked, a secondary software program examines the WKLD CODE file (#64) to determine if any CPT code(s) are inactive in the CPT file (#81) or if other file pointers are broken. If inactive code(s) are found, a VA Mailman message is automatically generated and sent once a day to the G.LMI mail group containing information about the code(s) and the action(s) taken by the software.

*3. The software processes workload data in LABORATORY SITE file (#69.9), PCE DEFAULT PROVIDER field (#617) and LAB OOS LOCATION field (#.8) even if these two fields are **not** defined. A VA Mailman report is automatically generated and sent to the LMI mail group once a day indicating those orders requiring additional attention because the default fields were **not** defined.

*4. The software implements the **new** automated Venipuncture workload reporting functionality using the same criteria as the Laboratory CPT workload reporting functionality.

5. The software acknowledges the actual user entering lab test orders in LAB ORDER ENTRY file (#69) for the PCE Registered Encounter rather than the user that started or tasked the PCE workload reporting background job.

6. LABORATORY SITE file (#69.9) locking logic is modified to correct the problem of not being able to edit this file while the LRNIGHTY background job is running.

*7. Add tests to a given accession [LRADD TO ACC] option is modified to activate the PCE workload reporting API. Any test(s) added to an accession will now receive PCE workload credit.

8. Order/test status [LROS] option is modified to correctly display test(s) added to an accession.

9. Enter/verify data (auto instrument) [LRVR] option is enhanced to allow users to edit, add, or subtract atomic test(s) from the lab test order list before beginning the verification of an atomic test(s) and to continue to the next accession number if the current accession is not collected. This enhancement applies to both verifying by accession number or UID (Universal Identification).

*10. Batch data entry [LRSTUF] option is modified to capture LMIP workload counts.

11. Results entry (batch) [LRMISTUF] is modified to capture LMIP workload counts.

12. The Bypass normal data entry [LRFAS] option is modified to accept the response of "YES" at the "Do you want to enter draw times?" prompt.

13. Accessioning tests ordered by ward order entry [LROE] option is modified to accurately determine if the tasked ROLLOVER ACCESSION [LRTASK ROLLOVER] option is actually running.

14. Review by order number [LRCENLKUP] option DATE display is converted to use Kernel date conversion utilities.

15. Edit or Print WKLD CODES [LR WKLD CODE EDIT PRINT] option is enhanced to print a listing of all WKLD codes, even if they have not been activated. This will correct the problem of WKLD codes that have a suffix of .0000 not printing.

16. Workload Report [LRCAPR1] option has been enhanced to allow the user to select combinations of LEDI collecting institutions or hospital locations.

17. When verifying Microbiology specimens the user is prompted for additional workload. A screen has been added to allow only a number between 1 and 25. This is to prevent inadvertent entering of WKLD code number instead of the multiply by number.

Menu Changes

LIM workload menu [LR LIM/WKLD MENU]

This menu [LR LIM/WKLD MENU] is modified to add the **new** InActive WKLD CODE File CPT Codes Print [LRCAPCPTI] option.

New Option

InActive WKLD CODE File CPT Codes Print [LRCAPCPTI] option

This **new** option scans the WKLD CODE file (#64) for CPT code(s) that are no longer allowed or CPT code(s) that are inactive in CPT file (#81). A VA Mailman message “WKLD CODE - CODE CHECK REPORT” is automatically generated and sent daily to the G.LMI mail group when this occur. This report will display all CPT code(s) that are no longer allowed, inactive CPT code(s) (i.e., why these CPT codes are inappropriate), laboratory test names linked to WKLD code(s) (i.e., laboratory test names listed on the report will **not** receive PCE workload reporting credit), and code(s) requiring a different entry in CPT file (#81) in order to capture PCE workload data.

The new Inactive WKLD CODE File CPT Codes Print [LRCAPCPTI] option is also useful when a new CPT code file is released (i.e., new CPT code files are usually distributed annually). The new CPT code files may contain CPT codes that are no longer allowed or CPT codes that are inactive in CPT file (#81). When CPT codes defined in the WKLD CODE file (#64) are deemed inactive in CPT file (#81), then the software enters a date in the WKLD CODE file (#64), INACTIVE DATE field (#3) for those inactive CPT codes. Laboratory CPT workload reporting software checks each CPT code in WKLD CODE file (#64) before sending Laboratory CPT workload data to the PCE workload reporting API. Whenever CPT code(s) are no longer allowed or has been inactivated a VA Mailman message is sent once a day to the G.LMI mail group.

Example: VA Mailman message “WKLD CODE - CODE CHECK REPORT”

```

Subj: WKLD CODE - CODE CHECK REPORT 12/14/99@14:44:25  [#83460]
From: POSTMASTER  In 'IN' basket.  Page 1
-----
Lab Order Number 100 has no Institution for the ordering location
=====
86081.0000 [1]  ABO Cell and Rh(D) Typing
86083  BLOOD TYPING;ANTIBODY SCREEN
Is an inactive CPT code.
Associated Tests
      ABO/RH TYPING  {1101}
Inactivation date of Dec 13, 1999 has been entered
*****
Listing of all offending codes
      ICPT      82534

```

Data Dictionary Changes

VISTA Laboratory CPT Codes and Modifiers Patch LR*5.2*263 installation process will execute the following file and field changes:

WKLD CODE file (#64)

The WKLD CODE file (#64) is modified to convert existing file data to a new data structure. New fields were created and several existing fields were modified to support the **VISTA** Laboratory CPT workload reporting new functionality.

1. CODE field (#18) multiple is **changed** from a free text field to a variable pointer field.
2. CODE subfile (#64.018), is **changed** from a free text to a variable pointer field.
3. CODE subfile (#64.018), CODE field (#.01) is **changed** to screen only active code entries to the MORPHOLOGY FIELD file (#61.1) (i.e., SNOMED code), ICD DIAGNOSIS file (#80) (i.e., ICD9 code), and CPT file (#81) (i.e., active CPT code).
4. CODE subfile (#64.018) is **changed** to add the **new** CODE NOTES field (#6). This new word processing field is used for tracking general notes regarding a particular code.
5. TIME ASPECT subfile (#64.01,30), LOINC CODE field (#4) is **changed** from a numeric to a pointer field. The LOINC Code field (#4) points to the LOINC CODE file (#95.3).
6. WKLD Code Notes field (#24) is a **new** word processing field used for storing general notes regarding inactive or erroneous code(s) automatically removed by this patch.
7. CODE subfile (#64.018), TYPE field (#5) set of codes is **changed**. This field is used to enter the coding system that uses these codes. The set of code "L FOR LOINC" is being removed from this field and replace by the DEFAULT LOINC CODE field (#25).
8. DEFAULT LOINC CODE field (#25) is a **new** pointer field that points to the LOINC CODE file (#95.3). This field is used to identify the default LOINC code. This field is usually used when the specimens are not clinically significant (i.e., body fluids).



LABORATORY SITE file (#69.9)

The LABORATORY SITE file (#69.9) was modified to support the **new** automated Venipuncture workload reporting software. The following **new** fields were created to assist with the achievement of this **new** automated software enhancement:

1. The **new** DIVISION PARAMETERS subfile (#618) is used for the automated Venipuncture workload reporting functionality.
2. The **new** DIVISION PARAMETERS field (#.01) is a pointer to the INSTITUTION file (#4). This field allows the automated Venipuncture workload reporting to be defined as multi-divisional.
3. The **new** VENIPUNCTURE DEFAULT ACC AREA field (#618) is a pointer to the ACCESSION file (#68). This field will allow the site to assign the venipuncture LMIP workload to a specific ACCESSION AREA. If this field is blank, the venipuncture workload software will use the ACCESSION AREA name that begins with 'HEM'. If there is no ACCESSION AREA with a name beginning with 'HEM', the ACCESSION AREA Internal Entry Number (IEN) of 10 will be used as the DEFAULT Venipuncture Accession Area.



Pre-Installation Information

This section provides information required prior to installing the **VISTA** Laboratory CPT Code Modifiers patch LR*5.2*263.

Staffing Requirements:

Information Resource Management Staff

Information Resource Management (IRM) staff is recommended for installing the **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263.

Laboratory Information Manager

The Laboratory Information Manager (LIM) is recommended to assist with the First Time CPT workload reporting, CPT workload reporting, and Venipuncture workload reporting setup processes.

Hardware Interfaces and Operating System

VISTA Laboratory CPT Codes and Modifiers Patch LR*5.2*263 software runs on the standard hardware platforms used by the Department of Veterans Affairs Healthcare facilities. These systems consist of standard or upgraded Alpha AXP clusters, and run either VMS or NT and the Open M product. All current 486 sites are being converted to Alpha 1000A AXP Cluster, NT and Open M systems.

System Performance Capacity:

There are no sufficient changes in the performance of the system once the CPT Codes and Modifiers Patch LR*5.2*263 is installed. There are no memory constraints. The use of the CPT codes and CPT modifiers should not create any appreciable global growth or network transmission problems

Kernel Installation and Distribution System (KIDS)

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 software distribution is using KIDS. For further instructions on using KIDS, please refer to the Kernel Version 8.0 Systems Manual

Installation Time:

Installation time is less than 15 minutes during off peak hours, and less than 30 minutes during peak hours (i.e., off peak hours is RECOMMENDED).

Users on the System

Users may remain on the system, but installation should be done during off peak hours and when the Laboratory computer users are idle. None of the Laboratory tasked jobs need to be stopped.

Backup Routines

It is **highly** recommended that a backup of the transport global is performed before installing the CPT Codes and Modifiers Patch LR*5.2*263.

Test Sites

Patch LR*5.2*263 was tested by the following sites:

- Kansas City, KA Iowa City, IA
- Milwaukee, WI Fayetteville, AR
- Long Beach, CA Huntington, WV
- Muskogee, OK

Database Integration Agreements (DBIAs)

The following DBIAs are approved for **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263:

- DBIA 1995-A - to retrieve CPT codes.
- DBIA 1995-B - to retrieve CPT modifiers from the CPT/HCFA Common Procedure Coding System (HCPCS) Version 6.0 Software application.

Protocols

There are no protocols required by this patch.

Namespace

VISTA Laboratory CPT Codes and Modifiers Patch LR*5.2*263 namespace is LR.

Associated NOIS:

ALB-0199-52914	LON-0999-62211	PHI-06000-21370
ALB-1299-50818	NCH-0100-41945	IOW-0600-41401
BHS-0999-11616	PRO-0999-11965	HUN-0600-21379
CLL-1099-43226	TAM-0899-31723	TUA-0600-31347
HIN-0499-42772	FAV-0600-71380	

LMI Mail Group

VA Mailman messages are automatically generated and sent to the LMI mail group whenever inactive or erroneous CPT code(s) are removed and whenever workload data in the LABORATORY SITE file (#69.9), PCE DEFAULT PROVIDER field (#617) and ACCESSION file (#68), LAB OOS LOCATION field (#.8) are **not** correctly defined.

Required Software Applications

Prior to installing **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 the following software applications **MUST** be installed:

Software Applications	Versions
CPRS	3.0
CPT/HCPCS	6.0
Kernel	8.0
FileMan	22.0
Mailman	7.1
Laboratory	5.2 (i.e., with patches installed)
National Laboratory Test (NLT)	5.254
Patient Care Encounter (PCE)	1.0

Required Patches:

Prior to installing **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 the following patches **MUST** be installed:

Software Applications	Patches
Laboratory V. 5.2	LR*5.2*105
	LR*5.2*153
	LR*5.2*158
	LR*5.2*163
	LR*5.2*202
	LR*5.2*221
	LR*5.2*240
	LR*5.2*254
CPT/HCPCS V. 6.0	ICPT*6*7
PCE V. 1.0	PX*1*73
	PX*1*74

Routine Summary

Routine Name	Before Patch	Checksum Values	
		After Patch	Patch List
LR263	N/A	7411624	263
LRCAPPH	10281625	11522455	1,19,127,136,138,158,153,263
LRCAPPH1	4949612	7745000	127,136,138,158,263
LRCAPPH3	N/A	6642885	263
LRCAPPH4	N/A	3179202	263
LRCAPPNP	N/A	1653480	263
LRCAPR1	8086519	9529509	263
LRCAPR2	8195892	8701428	88,105,263
LRCAPR4	6795674	7338553	263
LRCAPV3	8123485	8391773	105,263
LRCAPVM	5012091	5237437	49,163,263
LRCE	13210738	13336460	28,76,103,121,153,210,202,263
LRCENDEL	16365039	15254614	100,121,202,221,263
LRDIQ	9573488	10128715	86,153,263
LRGP2	3525048	6353513	153,221,263
LRMISTF1	14470635	14019130	121,128,202,263
LROE	14732765	14550901	100,121,201,221,263
LRORD3	7349040	7385601	153,263
LROS	16807258	16882422	121,153,202,210,221,263
LRSTUF2	8013388	8012263	121,153,263
LRTSTSET	12634119	12775322	65,100,121,153,201,202,263
LRTT5P1	12297887	12439150	153,221,263
LRVER1	6428527	6801758	42,153,201,215,239,240,263
LRVER3A	10780359	10780812	1,5,42,100,121,153,190,221,254,263
LRVR	12695281	13316120	42,153,263
LRVR4	8714660	8661306	14,42,121,153,221,263
LRVR5	11783101	11729747	1,42,153,263
LRVRA	6318899	6374326	153,221,263
LRXREF	9255866	9584168	70,153,263





Installation Instructions

The **VISTA** Laboratory CPT Codes and Modifiers Patch LR*5.2*263 is using the Kernel Installation and Distribution System (KIDS). For further instructions on using KIDS, please refer to the Kernel V. 8.0 Systems Manual, Chapter 26 pages 393-409.

Users may remain on the system, but installation should be done during off peak hours and when the Laboratory computer users are idle. None of the laboratory tasked jobs need to be stopped.

1. Use the 'INSTALL/CHECK MESSAGE' option on the PackMan menu. This option will load the KIDS package onto your system.
2. Review your mapped set. If the routines are mapped, they should be removed from the mapped set at this time.
3. The patch has now been loaded into a Transport global on your system. You now need to use KIDS to install the Transport global.
4. On the KIDS menu, under the 'Installation' menu, use the following options:
 - Print Transport Global
 - Compare Transport Global to Current System
 - Verify Checksums in Transport Global
 - Backup a Transport Global
4. No options need to be placed out of service.
5. Installation time is less than 15 minutes during off peak hours and less than 30 minutes during peak hours, which is NOT RECOMMENDED.
6. Installation of this patch requires minimal disk space.
7. From the 'Installation Menu' of the KIDS menu, run the option 'Install Package(s)'. Select the package 'LR*5.2*263' and proceed with the install.
9. If any routines were unmapped as part of step 2, they should be returned to the mapped set once the installation has run to completion.

Patch LR*5.2*263 Installation Process Screen Capture

Example:

Select Installation Option:

Install Package(s)

Select INSTALL NAME: LR*5.2*263 Loaded from Distribution
2/29/00@15:51:34 => LR*5.2*263

This Distribution was loaded on Feb 29, 2000@15:51:34 with header of
LR*5.2*263

It consisted of the following Install(s):

LR*5.2*263

Checking Install for Package LR*5.2*263

Will first run the Environment Check Routine, LR263

--- Environment Check is Ok ---

Install Questions for LR*5.2*263

Incoming Files:

64 WKLD CODE

Note: You already have the 'WKLD CODE' File.

69.9 LABORATORY SITE

Note: You already have the 'LABORATORY SITE' File.

Want KIDS to Rebuild Menu Trees Upon Completion of Install? YES// **YES<RET>**

Want KIDS to INHIBIT LOGONs during the install? YES// **NO<RET>**

Want to DISABLE Scheduled Options, Menu Options, and Protocols? YES// **NO<RET>**

Enter the Device you want to print the Install messages.

You can queue the install by enter a 'Q' at the device prompt.

Enter a '^' to abort the install.

DEVICE: HOME//<RET> TELNET

Install Started for LR*5.2*263 :

Feb 29, 2000@15:53:41

Build Distribution Date: Jan 27, 2000

Installing Routines:

Feb 29, 2000@15:53:41

Installing Data Dictionaries:

Feb 29, 2000@15:53:43

Installing PACKAGE COMPONENTS:

Installing OPTION

Feb 29, 2000@15:53:43

Running Post-Install Routine:

CONV^LR263.....

Removing CPT Code 83019

From 84483.0000 Helicobacter Pylorii Breath

Removing CPT Code 80054

From 81853.0000 Comprehensive Met Panel

Removing CPT Code 87087

From 87553.0000 Urine Culture

Creating Mail Message containing CPT Changes

Sending message to LMI Mail Group

Relinking NATIONAL VA LAB CODES TO WKLD CODE
LR*5.2*263

Updating Routine file...

Updating KIDS files...

LR*5.2*263 Installed.

Feb 29, 2000@15:54:32

Install Message sent

**** End of Example of Install dialog ****

Post Installation Information

After the WKLD CODE file (#64) new file structure is installed the post installation software will perform the following functions:

1. Review each code to determine if the code is valid and has not been inactivated in the CPT file (#81). If the code is inactive or erroneous, the code is removed. The software will record the code removal in the WKLD CODE NOTES field (#24). A VA MailMan message is automatically generated and sent to the G.LMI mail group if any codes are removed.
2. WKLD CODE file (#64) data is converted to the new data structure.
3. WKLD CODE file (#64), ASSOCIATED NAMES field (#23) entries are updated to reflect current linkages.
4. The Post Installation routine will set the WKLD CODE file (#64), BILLABLE PROCEDURE field (#4) to 'YES' for these codes:
 - Venipuncture Outpatient [89343.0000]
 - Venipuncture Travel Time [89341.0000]

NOTE: If the Laboratory Service **does not** perform venipuncture functions, the WKLD CODE file (#64), BILLABLE PROCEDURE field (#4) should be set to 'NO' and Venipuncture workload reporting setups are **not** required.

Use the Edit or Print WKLD CODES [LR WKLD CODE EDIT PRINT] option to set the WKLD CODE file (#64), BILLABLE PROCEDURE field (#4) to 'NO' if Venipuncture workload functions are **not** currently performed.

First Time Laboratory CPT Workload Reporting information

This section provides First Time Laboratory CPT workload reporting setup instructions and information for sites that are NOT currently using the Laboratory workload-reporting functionality.

NOTE: PCE workload reporting functionality **must** be setup **prior** to implementing the Laboratory First Time CPT workload reporting functionality. The PCE coordinator will normally setup the PCE workload reporting functionality.

First Time Laboratory CPT Workload Reporting Setup Instructions

1. LABORATORY SITE file (#69.9), WKLD STATS ON field (#17) **must** be defined as “YES” to turn on the Laboratory CPT workload reporting statistics functionality.

From the Lab liaison [LRLIAISON] menu (i.e., Supervisor Menu)
Select the Turn on workload stats for accession area [LR WKLD STATS ON ACC AREA] option to define the WKLD STATS ON field (#17) as ‘YES’.

2. Workload stats for Laboratory CPT workload reporting accession area **must** be turned on.

Select the Turn on workload stats for accession area [LR WKLD STATS ON ACC AREA] option to turn on the Laboratory CPT workload reporting accession area.

3. LABORATORY SITE file (#69.9), PCE/VSIT ON field (#615) should be defined to other than ‘OFF’ (i.e., recommended definition is PCE/VSIT ONLY).

Select VA FileMan Enter or Edit File Entries [DIEDIT] option to define the PCE/VSIT ON field (#615) entry.

4. LABORATORY SITE file (#69.9), PCE DEFAULT PROVIDER field (#617) should have a valid active provider identified (i.e., this is usually the Chief of Pathology and Laboratory Medicine (P&LMS)).

Select VA FileMan Enter or Edit File Entries [DIEDIT] option to define the PCE DEFAULT Provider field (#617) with a valid active provider entry.

PCE DEFAULT Provider field (#617) defined entry will be used as the default provider whenever the software **cannot** identify a provider. When a default provider is identified as an invalid entry, CPT lab test orders are marked and skipped. A VA Mailman message is automatically generated and sent to the G.LMI mail group indicating the observed problem.

NOTE: In the past the LABORATORY SITE file (#69.9), PCE DEFAULT PROVIDER field (#617) was required to have a valid active provider entry for the LRNIGHTY background job to run. The Laboratory CPT workload reporting software no longer requires an entry in this field for the LRNIGHTY background job to run.

5. The LABORATORY SITE file (#69.9), LAB OOS LOCATION field (#8) **must** have a valid hospital location defined.

Select the Create Laboratory OOS Locations [LR WKLD LOCATION] option to define the LAB OOS LOCATION field (#8) with a valid hospital location.

6. The MAILMAN SITE PARAMETERS file (#4.3), DEFAULT INSTITUTION field (#217) institution **must** be defined.

Select VA FileMan Enter or Edit File Entries [DIEDIT] option to define the DEFAULT INSTITUTION field (#217).

7. The LABORATORY SITE file (#69.9), Default Blood Specimen field (#100) **must** have a valid blood specimen defined.

Select VA FileMan Enter or Edit File Entries [DIEDIT] option to define the Default Blood Specimen field (#100) with a valid blood specimen.

8. Laboratory CPT workload reporting accession areas using workload collected **must** have workload reporting activated.

Select the Turn on workload stats for accession area [LR WKLD STATS ON ACC AREA] option to activate the Laboratory CPT workload reporting functionality.

9. Each Laboratory CPT workload reporting accession area can be define with a DEFAULT entry of Occasion of Service (OOS) Location. Multi-divisional sites most often use this DEFAULT entry.

Select the Edit ACC Area OOS Locations [LR WKLD ACC AREA LOCATION] option to define the DEFAULT entry as Occasion of Service (OOS) Location.

First Time Laboratory CPT Workload Reporting Software Logic

From this point, the enhanced LRNIGHTY background job scans the collected CPT lab test orders, extract all valid CPT codes, and pass the Laboratory CPT workload data to PCE workload reporting API.

NOTE: In addition the Laboratory CPT workload reporting software determines if Venipuncture workload should be captured.

The PCE workload reporting API passes back to the Laboratory CPT workload reporting software the PCE encounter number used for storing the passed PCE workload reporting API information. It is possible for one CPT lab test order to have multiple PCE encounter numbers based on the CPT accession area LAB OOS LOCATION field (#8) entry. PCE encounter numbers are displayed on various Order Status Screens in the Visit Number(s) field.

Example: PCE encounter numbers displayed in the Visit Number(s) field.

NOTE: The Visit Number(s) is using the PCE Internal Entry Number (IEN).

```
Order/test status screen - Visit Number(s): show the PCE encounter numbers.
Test          Urgency   Status          Accession
-Lab Order # 162690          Provider: The man
  Visit Number(s): 99999;
```

First Time Laboratory CPT Workload Reporting Information

```
BLOOD
CBC PROFILE          ROUTINE Test Complete 12/02/1999@07:41 HE 1202 10
-Lab Order # 162690          Provider: The man
  Visit Number(s): 99999;
BLOOD SERUM
MAGNESIUM           ROUTINE Test Complete 12/02/1999@08:02 DA 1202 32
CHEM 7              ROUTINE Test Complete 12/02/1999@08:02 DA 1202 32
-Lab Order # 163491          Provider: The man
  Visit Number(s): 99999;
BLOOD SERUM
URIC ACID           ROUTINE Test Complete 12/02/1999@14:37 DA 1202 234
```

Example: User's Visit Review [PXQ USER REVIEW] option displays the Visit Number(s) for CPT workload captured for a given order.

Select one of the following:

```
  P          Patient List of Visits
  I          Internal Entry Number of VISIT
```

Select by (P)atient or (I)en: P// Internal Entry Number of VISIT

Enter VISIT (UNIQUE ID or `1239): `99999

```
12-2-1999@06:57:38      PATIENT,SICK      LAB DIV 623 OOS ID 108 29TRC-MUS
```

Select one of the following:

```
  D          Default (first field of each file/subfile)
  A          All fields in a file/subfile (except 'NULL')
  C          Customized by User (Default plus added fields)
```

Format of Print out: // All fields in a file/subfile (except 'NULL')

DEVICE: HOME// TELNET Right Margin: 80//<RET>

```
*****
***  R E C O R D      O F      R E L A T E D      E N T R I E S      ***
```

The Following is the VISIT file entry and
ALL records pointing back to this entry.

```
VISIT RECORD      --- #9999999

DATE/TIME --- DEC 02, 1999@06:57:38
PATIENT      --- PATIENT,SICK
LOCATION      --- LAB DIV 623 OOS ID 108
```

```
-----
FILE = VISIT #9000010  RECORD #99999
VISIT/ADMIT DATE&TIME      = DEC 02, 1999@06:57:38
DATE VISIT CREATED        = DEC 02, 1999@07:28:51
TYPE                      = VA
PATIENT NAME              = PATIENT,SICK
LOC. OF ENCOUNTER        = MUSKOGEE, OK
SERVICE CATEGORY        = DAILY HOSPITALIZATION DATA
DSS ID                   = LABORATORY
DEPENDENT ENTRY COUNT    = 3
DELETE FLAG              =
```

First Time Laboratory CPT Workload Reporting Information

PARENT VISIT LINK =
 DATE LAST MODIFIED = DEC 02, 1999@07:28:52
 CHECK OUT DATE&TIME =
 ELIGIBILITY = NSC, VA PENSION
 HOSPITAL LOCATION = LAB DIV 623 OOS ID 108
 CREATED BY USER = WORKER,HARD V
 OPTION USED TO CREATE = LRENTER
 PROTOCOL =
 OUTSIDE LOCATION =
 VISIT ID = 29TRC-MUS
 PATIENT STATUS IN/OUT = IN
 ENCOUNTER TYPE = ANCILLARY
 SERVICE CONNECTED =
 AGENT ORANGE EXPOSURE =
 IONIZING RADIATION EXPOSURE =
 PERSIAN GULF EXPOSURE =
 MILITARY SEXUAL TRAUMA =
 COMMENTS =
 PACKAGE = PCE PATIENT CARE ENCOUNTER
 DATA SOURCE = LAB DATA

 FILE = OUTPATIENT ENCOUNTER #409.68 RECORD #999999
 DATE = DEC 02, 1999@06:57:38
 PATIENT = PATIENT,SICK
 CLINIC STOP CODE = LABORATORY
 LOCATION = LAB DIV 623 OOS ID 108
 VISIT FILE ENTRY = DEC 02, 1999@06:57:38
 CHECK OUT PROCESS COMPLETION = DEC 02, 1999@07:28
 ORIGINATING PROCESS TYPE = STOP CODE ADDITION
 APPOINTMENT TYPE = REGULAR
 MEDICAL CENTER DIVISION = MUSKOGEE VAMC
 STATUS = INPATIENT APPOINTMENT
 ELIGIBILITY OF ENCOUNTER = NSC, VA PENSION
 UNIQUE VISIT NUMBER = 29TRC-MUS
 EDITED LAST BY = WORKER,HARD V
 DATE/TIME LAST EDITED = DEC 02, 1999@07:28:52
 CREATED BY = WORKER,HARD V
 DATE/TIME CREATED = DEC 02, 1999@07:28:52
 COMPUTER GENERATED? = YES

 FILE = V PROVIDER #9000010.06 RECORD #999999
 PROVIDER = GIVER,CARE
 PATIENT NAME = PATIENT,SICK
 VISIT = DEC 02, 1999@06:57:38
 PRIMARY/SECONDARY = PRIMARY
 PERSON CLASS = Physicians (M.D.)
 EDITED FLAG = EDITED
 AUDIT TRAIL = 24-A 5591;24-E 5591;
 PACKAGE = LAB SERVICE
 DATA SOURCE = LAB DATA

 FILE = V CPT #9000010.18 RECORD #999999
 CPT = 85025
 PATIENT NAME = PATIENT,SICK
 VISIT = DEC 02, 1999@06:57:38
 PROVIDER NARRATIVE = AUTOMATED HEMOGRAM
 QUANTITY = 1

First Time Laboratory CPT Workload Reporting Information

ENCOUNTER PROVIDER = GIVER,CARE
AUDIT TRAIL = 24-A 5591;
PACKAGE = LAB SERVI
DATA SOURCE = LAB DATA

The Following is the SCHEDULING VISITS file.
This is where Scheduling stores the CPT codes.

There are procedures in PCE but no record in scheduling.

OUTPATIENT ENCOUNTER --- #99999

FILE = V CPT #9000010.18 RECORD #99999
CPT = 85025
PATIENT NAME = PATIENT,SICK
VISIT = DEC 02, 1999@06:57:38
PROVIDER NARRATIVE = AUTOMATED HEMOGRAM
QUANTITY = 1
ENCOUNTER PROVIDER = GIVER,CARE
AUDIT TRAIL = 24-A 5591;
PACKAGE = LAB SERVICE
DATA SOURCE = LAB DATA

FILE = TRANSMITTED OUTPATIENT ENCOUNTER #409.73 RECORD #999999
NUMBER = 999999
OUTPATIENT ENCOUNTER = DEC 02, 1999@06:57:38
TRANSMISSION REQUIRED = YES
TRANSMISSION EVENT = ADD
DATE/TIME OF EVENT = DEC 02, 1999@07:28:52
USER CAUSING EVENT = WORKER,HARD V
PATIENT = PATIENT,SICK
ENCOUNTER DATE = DEC 02, 1999 06:57:38
HOSPITAL LOCATION = LAB DIV 623 OOS ID 108
PATIENT SSN = 1010101010
ENCOUNTER DIVISION = MUSKOGEE VAMC
ENCOUNTER DIVISION (INTERNAL) = 1

Laboratory CPT Workload Reporting Information

This section contains the Laboratory CPT workload reporting setup instructions and information for sites that are ALREADY using the **VISTA** Laboratory workload reporting software prior to the installation of this patch.

Laboratory CPT Workload Reporting Setup Instructions

1. All lab test orders in LABORATORY TEST file (#60) **must** be linked to the NATIONAL VA LAB CODES (i.e., also referred to as WKLD codes or NLT codes).

Select the Semi-automatic Linking of file 60 to 64 [LR7O 60-64 AUTO] and the Manual Linking of file 60 to 64 [LR7O 60-64 MANUAL] options to link the NATIONAL VA LAB CODES.

- 2 All WKLD codes **must** be assigned valid CPT codes for Laboratory CPT workload reporting software to pass data the PCE workload reporting API.

Select the Edit or Print WKLD CODES [LR WKLD CODE EDIT PRINT] option to assigned valid CPT codes.

NOTE: Laboratory CPT workload is ONLY collected for outpatients based on the HOSPITAL LOCATION file (#44), TYPE field (#3) defined as CLINIC, MODULE, or OTHER LOCATION.

3. The Laboratory CPT workload reporting software uses the HOSPITAL LOCATION file (#44), Institution field (#3) defined entry to determine the institution that should receive Laboratory CPT workload reporting credit. If INSTITUTION field (#3) is **not** defined the MAILMAN SITE PARAMETERS file (#4.3), DEFAULT INSTITUTION field (#217) entry is used.

4. Each CPT lab test order checks the ACCESSION file (#68), LAB OOS LOCATION field (#8) for a defined location. If this field is not defined, then the LABORATORY SITE file (#69.9), DEFAULT LAB OOS LOCATION field (#.8) defined location is used.

Select the Edit ACC Area OOS Locations [LR WKLD ACC AREA LOCATION] option to define the ACCESSION file (#68), LAB OOS LOCATION field (#8) with a location.

Laboratory CPT Workload Reporting Software Logic

The Laboratory CPT Codes and Modifiers Patch LR*5.2*263 software converts all active and valid codes entries in WKLD CODE file (#64) to the **new** file structure and resets the cross-references. The software checks WKLD CODE file (#64), CODE field (#18) for active and valid code entries. Each code entry is checked for the appropriate modifier. If there are multiple occurrences of identical code entries, the software will automatically add the DISTINCT PROCEDURAL SERVICE (59) modifier to each succeeding code entry if the modifier is appropriate.

All collected CPT lab test orders are checked for active and valid code entries in LABORATORY TEST file (#60), NATIONAL VA LAB CODE field (#64). This field points to the WKLD CODE file (#64). The software removes all inactive and invalid code entries and creates an entry in WKLD CODE file (#64), WKLD CODE NOTES field (#24) indicating when the inactive and invalid code(s) removal occurred.

The specimen DATE/TIME OF COLLECTION is used as the encounter number date time. The software scans the code entries associated with the collected (accessioned) CPT lab test order for active and valid codes; CPT workload data is then passed to PCE workload reporting API. The PCE workload reporting API passes back to Laboratory CPT workload reporting software the encounter number used for storing the passed PCE workload reporting API information. It is possible for one CPT lab test order to have multiple encounter numbers based on the Laboratory CPT accession area entry in the ACCESSION file (#68), LAB OOS LOCATION field (#8).

If a CPT lab test order(s) with the status of NOT PERFORMED is ultimately verified and sent to PCE workload reporting API, Laboratory CPT workload reporting will **not** receive credit for CPT lab test order(s) with the status of NOT PERFORMED. The enhanced LRNIGHTY background job will automatically delete the CPT lab test order(s) with the status of NOT PERFORMED and send a message to PCE workload reporting API that the CPT lab test order(s) was deleted.

Listing of elements passed to PCE workload reporting API:

OOS location	Stop Code number of the ordering location
Reporting Institution	Service Category of OOS
Provider	Encounter type of Ancillary
Encounter Date/time	CPT codes for each collected lab test order as defined in WKLD CODE file (#64)
Patient Pointer	CPT modifier if appropriate

Venipuncture Workload Reporting Information

This section contains the **new** automated Venipuncture workload reporting functionality information and Venipuncture workload reporting multi-divisional setup instructions.

NOTE: If the Laboratory Service does **not** perform venipuncture functions, the WKLD CODE file (#64), BILLIABLE PROCEDURE field (#4) should be set to 'NO'. Therefore, Venipuncture workload reporting setups for multi-divisional are **not** required.

Use the Edit or Print WKLD CODES [LR WKLD CODE EDIT PRINT] option to set the WKLD CODE file (#64), BILLABLE PROCEDURE field (#4) to 'NO'.

Venipuncture Workload Reporting Automated Setup Functionality

Defined Institution

The **new** Venipuncture workload reporting automated functionality uses the HOSPITAL LOCATION file (#44), INSTITUTION field (#3) defined entry to determine the institution that should receive Venipuncture workload reporting credit. However, if the INSTITUTION field (#3) is **not** defined the MAILMAN SITE PARAMETERS file (#4.3), DEFAULT INSTITUTION field (#217) entry is used.

Defined Accession Area

The **new** Venipuncture workload reporting automated functionality assumes that a Venipuncture workload reporting accession area has already been defined with the letters 'HEM'. The Venipuncture workload reporting automated functionality checks the LABORATORY SITE file (#69.9), **new** DIVISION PARAMETERS subfile (#618) for the defined accession area of 'HEM', (i.e., which is used for storing Venipuncture workload reporting data). The WKLD DATA file (#64.1), MAJ. SECT and SUBSECTION fields are automatically set to the defined accession area.

However, if the Venipuncture workload reporting accession area has **not** been defined the software uses the ACCESSION file (#68), AREA field (#.01) Internal Entry Number (IEN) 10 as the DEFAULT accession area for Venipuncture workload reporting.

NOTE: Venipuncture workload reporting automated DEFAULTS:
ACCESSION AREA is HEMATOLOGY
LAB DIVISION is CLINICAL PATHOLOGY
DATE AND TIME is SPECIMEN COLLECTION Date/Time
LAB TEST is FIRST COLLECTED TEST of the lab test order

Venipuncture Default Codes

The **new** Venipuncture workload reporting automated functionality ACTUALLY indicates that the lab has received at least one specimen from a patient.

- Specimen Collection workload code of Venipuncture Travel Time [89341.0000] is DEFAULT CODE for Lab Collect (LC) and Immediate Collect (I).
- Specimen Collection WKLD CODE of Venipuncture Outpatient [89343.0000] is DEFAULT CODE for Send Patient (SP).

NOTE: THE SPECIMEN OBTAINED MAY **NOT** BE A BLOOD SPECIMEN. THE DEFAULT CODES (venipuncture) INDICATES THAT THE LABORATORY COLLECTED A SPECIMEN FOR THIS PARTICULAR LAB TEST ORDER. ONLY ONE SPECIMEN COLLECTION WORKLOAD UNIT PER LAB TEST ORDER IS CAPTURED REGARDLESS OF THE NUMBER OF ACTUAL SPECIMENS COLLECTED FOR THE LAB TEST ORDER.

Example: Venipuncture Workload Reporting Screen Capture

```
DATE: DEC 02, 1999
WKLD CODE: +Venipuncture Outpatient      UNIT WEIGHT: 1
ACCESSION WKLD CODE TIME: 12.5713      LAB TEST: GLUCOSE
WEIGHT MULTIPLIER: 1                   LAB DIVISION: CLINICAL PATHOLOGY
MAJ. SECT.: SEND OUT                   SUBSECTION: SEND OUT
ACC NO.: CH 1202 15                     PATIENT: NOSE,LIMP
ORIGINAL ACC DATE: DEC 02, 1999
DATE ORDERED: DEC 02, 1999@12:57:13
SPECIMEN NO.: 1                         SPECIMEN: BLOOD
REPORT ROUTING LOCATION: 2S             PROVIDER: POKEMON
LOG IN PERSON: DUCK,DONALD              LOCATION TYPE: WARD
ORDERING LOCATION: 7 ATU                 URGENCY: ROUTINE
VERIFY TECH.: DUCK,DONALD               WORK AREA: SEND OUT
```

Venipuncture Workload Reports Generation

Venipuncture workload counts are now captured automatically and are no longer entered as manual totals for a given day. However, there is **not** an actual Venipuncture workload reporting accession area where lab tests can be logged. Therefore, using the accession area driven reports will **not** yield any Venipuncture workload reports. You must use the WKLD DATA file (#64.1) or the WKLD statistics reports [LR WKLD2] option 'Detail workload report' selection to generate Venipuncture workload reports.

Example: 'Detail workload report' Screen Capture

```
Select OPTION NAME: LRMENU           Laboratory DHCP Menu

Select Laboratory DHCP Menu Option:  Process data in lab menu<RET>

Select Process data in lab menu Option: Misc. Processing Menu<RET>

Select Misc. Processing Menu Option:  Lab statistics menu<RET>

Select Lab statistics menu Option:     WKLD statistics reports<RET>

Select WKLD statistics reports Option: Detail workload report<RET>

Do you want to print a specific DIVISION (YES or NO)? No//<RET>   (No)
BEGIN DATE : T (MAY 19, 2000)<RET>
END DATE   : T (MAY 19, 2000)<RET>
```

Select one of the following:

```
T          TEST AUDIT (File 68)
W          WORKLOAD CODE (File 64.1)
```

TEST AUDIT should not be used for workload reporting.
It should ONLY be used for trouble Shooting.

```
REPORT BY: WORKLOAD CODE (File 64.1)
Select ACCESSION AREA (required - 1 only): PHLEBOTOMY<RET>
```

Select one of the following:

```
D          DETAILED
C          CONDENSED
```

REPORT TYPE: CONDENSED

DEVICE: HOME//<RET> TELNET TO ALPHAS

Detailed Workload Report (by WKLD Code) for 05/19/2000 to 05/19/2000 PAGE 1

(Print date: 05/19/2000)

***** CONDENSED *****

Venipuncture Workload Reporting Information

Workload Code Summary

+Venipuncture Outpatient	89343.0000	132
+Venipuncture Travel Time	89341.0000	66

TOTAL		198

Enter RETURN to continue or '^' to exit:
Detailed Workload Report (by WKLD Code) for 05/19/2000 to 05/19/2000 PAGE 2

(Print date: 05/19/2000)

***** CONDENSED *****

Venipuncture Workload Reporting Multi-Divisional Setup

The LABORATORY SITE file (#69.9) was modified to add the **new** DIVISION PARAMETERS multiple field (#618), DIVISION PARAMETERS field (#.01), and VENIPUNCTURE DEFAULT ACC AREA subfile (#618). This new subfile and fields are used to automate Venipuncture workload reporting functionality. The DIVISION PARAMETERS field (#.01) points to the INSTITUTION file (#4). This field is used to define the LABORATORY SITE file (#69.9) institution as multi-divisional for Venipuncture workload reporting. The Venipuncture DEFAULT ACC AREA subfile (#618) points to the ACCESSION file (#68). This field is used by the Venipuncture workload reporting background job to determine the accession area for the institution to be used for the automated Venipuncture workload reporting.

1. The Venipuncture workload reporting functionality for multi-divisional is based on the LABORATORY SITE file (#69.9), **new** DIVISION PARAMETERS subfile (#618) defined institution. To implement Venipuncture workload reporting functionality for multi-divisional sites the DIVISION PARAMETERS subfile (#618) institution **must** be defined as multi-divisional.

Select VA FileMan Enter or Edit File Entries [DIEDIT] option to define the DIVISION PARAMETERS subfile (#618) institution as multi-divisional for implementing Venipuncture workload reporting.

Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Test Plan

This Test Plan may be used for testing the Laboratory CPT Codes and Modifiers Patch LR*5.2*263 new functionality and changes made after the installation and implementation of this patch:

1. Field/Routine/Option changed:

Removes workload credit for any test(s) with a status of Not Performed (NP).

Option to check change:

Users Visit Review [PXQ USER REVIEW] option

What to check for:

Order a test patient. Give it a status of Not Performed. Use an Order/test status option to find the visit number. Using this visit number, exercise the User Visit Review [PXQ USER REVIEW] option. Check to see if there is any CPT data for that lab test order.

2. Field/Routine/Option changed:

The user that entered the lab test order will be used as the responsible user for the PCE registered encounter rather than the user that started or tasked the PCE Workload background job.

Option to check change:

Users Visit Review [PXQ USER REVIEW] option

What to check for:

Order a test for a test patient. Give it a status of Not Performed. Use an Order/test status [LROS] option to find the visit number. Using this visit number, exercise the User Visit Review [PXQ USER REVIEW] option. Check that the DUZ shown is the person that ordered the test.

Example: Order/test status screen - Visit Number(s): show the PCE encounter numbers.

Test	Urgency	Status	Accession
-Lab Order # 162690			Provider: The man
Visit Number(s): 99999;			
BLOOD			
CBC PROFILE	ROUTINE	Test Complete	12/02/1999@07:41 HE 1202 10
-Lab Order # 162690			Provider: The man
Visit Number(s): 99999;			
BLOOD SERUM			

Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Test Plan

MAGNESIUM ROUTINE Test Complete 12/02/1999@08:02 DA 1202 32
CHEM 7 ROUTINE Test Complete 12/02/1999@08:02 DA 1202 32
-Lab Order # 163491 Provider: The man
Visit Number(s): 99999;
BLOOD SERUM
URIC ACID ROUTINE Test Complete 12/02/1999@14:37 DA 1202 234

The User's Visit Review [PXQ USER REVIEW] option displays what CPT workload data has been captured for a given order. The Visit Number(s) information is entered at the Enter VISIT (UNIQUE ID or 1239) prompt.

Example: User's Visit Review [PXQ USER REVIEW] option

Select one of the following:

- P Patient List of Visits
I Internal Entry Number of VISIT

Select by (P)atient or (I)en: P// Internal Entry Number of VISIT<ret>

Enter VISIT (UNIQUE ID or `1239): `99999
12-2-1999@06:57:38 PATIENT,SICK LAB DIV 623 OOS ID 108 29TRC-MUS

Select one of the following:

- D Default (first field of each file/subfile)
A All fields in a file/subfile (except 'NULL')
C Customized by User (Default plus added fields)

To customize the screen display (i.e., your NAME, FILE/SUBFILE#s, and FIELD#s) use VA FileMan Enter or Edit File Entries [DIEDIT] option to add entries to the PCE CUSTOMIZE REPORT file.

Enter '^'^ to exit option
Format of Print out: // All fields in a file/subfile (except 'NULL')

DEVICE: HOME// TELNET Right Margin: 80//

*** R E C O R D O F R E L A T E D E N T R I E S ***

The Following is the VISIT file entry and ALL records pointing back to this entry.

VISIT RECORD --- #999999
DATE/TIME --- DEC 02, 1999@06:57:38
PATIENT --- PATIENT,SICK
LOCATION --- LAB DIV 623 OOS ID 108

FILE = VISIT #9000010 RECORD #99999
VISIT/ADMIT DATE&TIME = DEC 02, 1999@06:57:38
DATE VISIT CREATED = DEC 02, 1999@07:28:51

Laboratory CPT Codes and Modifiers Patch LR*5.2*263 Test Plan

TYPE	= VA
PATIENT NAME	= PATIENT,SICK
LOC. OF ENCOUNTER	= MUSKOGEE, OK
SERVICE CATEGORY	= DAILY HOSPITALIZATION DATA
DSS ID	= LABORATORY
DEPENDENT ENTRY COUNT	= 3
DELETE FLAG	=
PARENT VISIT LINK	=
DATE LAST MODIFIED	= DEC 02, 1999@07:28:52
CHECK OUT DATE&TIME	=
ELIGIBILITY	= NSC, VA PENSION
HOSPITAL LOCATION	= LAB DIV 623 OOS ID 108
**check here CREATED BY USER	= WORKER,HARD V
OPTION USED TO CREATE	= LRENTER
PROTOCOL	=
OUTSIDE LOCATION	=
VISIT ID	= 29TRC-MUS
PATIENT STATUS IN/OUT	= IN
ENCOUNTER TYPE	= ANCILLARY
SERVICE CONNECTED	=
AGENT ORANGE EXPOSURE	=
IONIZING RADIATION EXPOSURE	=
PERSIAN GULF EXPOSURE	=
MILITARY SEXUAL TRAUMA	=
COMMENTS	=
PACKAGE	= PCE PATIENT CARE ENCOUNTER
DATA SOURCE	= LAB DATA

FILE = OUTPATIENT ENCOUNTER #409.68	RECORD #999999
DATE	= DEC 02, 1999@06:57:38
PATIENT	= PATIENT,SICK
CLINIC STOP CODE	= LABORATORY
LOCATION	= LAB DIV 623 OOS ID 108
VISIT FILE ENTRY	= DEC 02, 1999@06:57:38
CHECK OUT PROCESS COMPLETION	= DEC 02, 1999@07:28
ORIGINATING PROCESS TYPE	= STOP CODE ADDITION
APPOINTMENT TYPE	= REGULAR
MEDICAL CENTER DIVISION	= MUSKOGEE VAMC
STATUS	= INPATIENT APPOINTMENT
ELIGIBILITY OF ENCOUNTER	= NSC, VA PENSION
UNIQUE VISIT NUMBER	= 29TRC-MUS
EDITED LAST BY	= WORKER,HARD V
DATE/TIME LAST EDITED	= DEC 02, 1999@07:28:52
CREATED BY	= WORKER,HARD V
DATE/TIME CREATED	= DEC 02, 1999@07:28:52
COMPUTER GENERATED?	= YES

FILE = V PROVIDER #9000010.06	RECORD #999999
PROVIDER	= GIVER,CARE
PATIENT NAME	= PATIENT,SICK
VISIT	= DEC 02, 1999@06:57:38
PRIMARY/SECONDARY	= PRIMARY
PERSON CLASS	= Physicians (M.D.)
EDITED FLAG	= EDITED
AUDIT TRAIL	= 24-A 5591;24-E 5591;
PACKAGE	= LAB SERVICE
DATA SOURCE	= LAB DATA

```
-----  
**Check here* FILE = V CPT #9000010.18 RECORD #99999  
CPT = 85025  
PATIENT NAME = PATIENT, SICK  
VISIT = DEC 02, 1999@06:57:38  
PROVIDER NARRATIVE = AUTOMATED HEMOGRAM  
QUANTITY = 1  
ENCOUNTER PROVIDER = GIVER, CARE  
AUDIT TRAIL = 24-A 5591;  
PACKAGE = LAB SERVICE  
DATA SOURCE = LAB DATA  
-----
```

3. Field/Routine/Option changed:

Order/Test Status [LROS] option modified to correctly display test added to accession.

Option to check change:

Order/Test Status [LROS] option

What to check for:

Add a test to an accession then use the order test status option to check if it displays the added test.

4. Field/Routine/Option changed:

The Inactive WKLD CODE File CPT Codes Print [LRCAPCPTI] option is added to the LIM workload [LR LIM/WKLD MENU] menu. This option will scan the WKLD CODE file (#64) for CPT codes that are inactive in the CPT file (#81) and print a report of the results. This option may be useful when new CPT Code files are installed. When new CPT Code files are released (i.e., new CPT files are usually distributed annually), it may contain codes that are no longer allowed or the code is inactive in the CPT file (#81). The Laboratory PCE interface checks each CPT code in WKLD CODE file (#64) before sending CPT workload reports to the PCE API. If CPT codes defined in WKLD CODE file (#64) is deemed inactive in CPT Code files, the software enters a date in the WKLD CODE file (#64), INACTIVE DATE field (#3) for that particular code. A VA MailMan message is sent daily to the G.LMI mail regarding the inactive CPT code.

Option to check change:

Inactive WKLD CODE File CPT Codes Print [LRCAPCPTI] option.

What to check for:

Use the option Inactive WKLD CODE File CPT Codes Print [LRCAPCPTI] to see if there are any codes missing information. If there aren't any, create one. Then check option again. Do not repair the code information until 24 hours have passed. Verify that a VA MailMan message was received by the G.LMI mail group regarding CPT codes needing attention.

Example: VA MailMan message screen capture

```

Subj: WKLD CODE - CODE CHECK REPORT 12/14/99@14:44:25  [#83460]
From: POSTMASTER  In 'IN' basket.  Page 1
-----
Lab Order Number 100 has no Institution for the ordering location
=====
86081.0000 [1]  ABO Cell and Rh(D) Typing
86083  BLOOD TYPING;ANTIBODY SCREEN
Is an inactive CPT code.
Associated Tests
      ABO/RH TYPING  {1101}
Inactivation date of Dec 13, 1999 has been entered
*****
Listing of all offending codes

      ICPT      82534

```

5. Field/Routine/Option changed:

When the workload capture software background job is tasked, a secondary program will examine the WKLD CODE file (#64) to determine if any CPT codes are inactivated in the CPT file (#81) or if other file pointers are broken. If inactive code(s) are found, a VA MailMan message containing information about the code(s) and action(s) taken by the software is sent to the local G.LMI Mail Group. This MailMan message is sent once each day.

Option to check change:

VA Mailman options. Member of the mail group G.LMI.

What to check for:

Use the Inactive WKLD CODE File CPT Codes Print [LRCAPCPTI] option to see if there are any codes missing information. If there aren't any, create one. Then check option again. Do not repair the code information until 24 hours have passed. Verify that a VA Mailman message was received by the G.LMI mail group regarding the codes needing attention.

6. Field/Routine/Option changed:

The Add tests to a given accession [LRADD TO ACC] option has been enhanced to activate the PCE Workload API. Any test(s) added to an accession will receive PCE Workload credit.

Option to check change:

Add tests to a given accession [LRADD TO ACC] option and the Order/Test Status [LROS] option.

What to check for:

Use the Add tests to a given accession [LRADD TO ACC] option to add a test to a test patient. Use a workload option to check to see if the PCE workload credit was applied.

7. Field/Routine/Option changed:

This patch also automatically captures Venipuncture workload in the same manner as verified workload data is captured.

Option to check change:

Workload Option

What to check for:

Use a workload option to check if phlebotomy Venipuncture data has been captured.

8. Field/Routine/Option changed:

The Batch data entry [LRSTUF] option and Results entry (batch) [LRMISTUF] option has been enhanced to capture LMIP workload counts.

Option to check change:

Workload Options

What to check for:

Use a workload option to check if the LMIP workload data has been captured.

9. Field/Routine/Option changed:

The file locking logic has been changed to correct the problem of not being able to edit the LABORATORY SITE file (#69) while the workload background job was running.

Option to check change:

VA FileMan Enter or Edit File Entries [DIEDIT] option

What to check for:

Try to edit the LABORATORY SITE file (#69) while the workload background job is running.

10. Field/Routine/Option changed:

The Enter/verify data (auto instrument) [LRVR] option has been corrected to allow the user to modify, add, or subtract atomic test(s) from the test list.

Option to check change:

Enter/verify data (auto instrument) [LRVR] option

What to check for:

Use the Enter/verify data (auto instrument) [LRVR] option to try to modify, add, or subtract atomic test(s) from the test list.

11. Field / Routine / Option changed:

The Bypass normal data entry [LRFAS] option prompt of “Do you want to enter draw times?” will accept the response of “YES”.

Option to check change:

Bypass normal data entry [LRFAS] option

What to check for:

Use the Bypass normal data entry [LRFAS] option to check if the prompt of “Do you want to enter draw times?” will accept the response of “YES”

12. Field/Routine/Option changed:

The Enter/verify data (auto instrument) [LRVR] option has been modified to continue to the next accession number if the current accession is not collected. This enhancement applies to both verifying by accession number or UID.

Option to check change:

Enter/verify data (auto instrument) [LRVR] option

What to check for:

Accession two test patients, then mark only the second accession as collected. Use the Enter/verify data option on the first accession to try to see if it will go to the next accession.

13. Field/Routine/Option changed:

The Accessioning tests ordered by ward order entry [LROE] option has been modified to more accurately determine if the tasked ROLLOVER ACCESSION [LRTASK ROLLOVER] option is actually running.

Option to check change:

Accessioning tests ordered by ward order entry [LROE] option

What to check for:

Use the Accessioning tests ordered by ward order entry [LROE] option to try to accession while a rollover is in process to see if you get an error message.